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Study Related to Continuing Education in Saskatchewan Veterinarians and the Western College of Veterinary Medicine

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STUDY RELATED TO CONTINUING EDUCATION IN SASKATCHEWAN VETERINARIANS AND THE WESTERN COLLEGE OF VETERINARY MEDICINE

ABSTRACT

This survey of 142 Saskatchewan veterinarians appraised their involvement in continuing education and also: their attitudes to continuing education and the veterinary profession; what they felt were the major obstacles to taking part; their views on mandatory attendance in continuing education to retain a license to practice; the continuing education program offered by the Western College of Veterinary Medicine; preferences for continuing education scheduling; effectiveness of different educational methods; and preferred topics for continuing education programs.

The study further examined personal statistics such as age, salary, hours of work, population of the town in which they reside, and percentage of time spent in working with different types of animals.

This information will be used by veterinary educators to improve the effectiveness of continuing education programs for the Province's veterinarians.

STUDY RELATED TO CONTINUING EDUCATION IN SASKATCHEWAN VETERINARIANS AND THE WESTERN COLLEGE OF VETERINARY MEDICINE

NON-TECHNICAL REPORT

This comprehensive survey of 142 Saskatchewan veterinarians (75 per cent of the survey population) analyzed responses to a 20-page questionnaire which explored the following areas:

a) participation in continuing veterinary education both for those types of programs which necessitated absence from the home environment and those which did not;

b) attitudes and feelings concerning the veterinary profession and the veterinary profession;

c) perceived obstacles to continuing education;

d) demographic and work-related information including age, sex, institution granting the D.V.M. degree, number of dependents, annual income, income derived from non-veterinary activities, hours worked per week, population of city/town where practice headquarters is located, employment situation, time spent in species-related practice, position in practice;

e) financing continuing education;

f) attitudes toward mandatory participation in continuing education to retain licensure;

g) the continuing education program offered by the Western College of Veterinary Medicine;

h) preferences for continuing education scheduling;

i) effectiveness of continuing education methods;

j) preferences for continuing education topics.

Respondents were invited to submit written comments on selected topics and were welcome to add comments on any facet of continuing education.

The study provided useful bench-mark data on the profession in Saskatchewan.

The following observations and recommendations might be of interest for planners of continuing education programs for veterinarians:

1. Veterinarians regard a shortage of time as the most serious obstacle to participation in continuing education.

2. Females are making up a larger part of the veterinary population.

3. The Western College of Veterinary Medicine should emphasize development of regional meetings and wet labs held on campus.

4. Continuing education courses for veterinarians would be best scheduled for Saturdays and Fridays followed by Thursdays in the months of January, September or February.

5. Two-day and one-day conferences are preferred although half-day meetings are acceptable especially if held in the afternoon or evening.

6. Wet labs and lectures/seminars are preferred educational methods.

7. Veterinarians tend to prefer meetings of specialty groups associated with provincial meetings.

8. Most favoured continuing topics for veterinary continuing education courses were as follows:

   a) general interest topic; business management

   b) food animal topics; respiratory diseases; nutrition; preventive medicine; infectious diseases; reproductive disorders; diagnostic tests; bull evaluation; neonatal diseases; internal medicine; digestive disorders; metabolic diseases; surgery; agricultural economics

   c) small animal topics; skin diseases; urinary diseases; gastrointestinal diseases; diagnostic tests; diagnostic radiology; ophthalmology

   d) equine topics; abdominal pain, respiratory diseases, lower limb lameness, reproductive disorders, infectious diseases, neonatal diseases, gastrointestinal diseases, nutrition, upper limb lameness.

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ACKNOWLEDGMENTS

A study such as this could not be accomplished without the interest and support of many people.

Succeeding councils of the Saskatchewan Veterinary Medical Association supported the concept of the study and maintained ongoing support.

The financial support of Saskatchewan Agriculture through the Agricultural Development Fund is gratefully acknowledged.

Jonathon Moore, with the assistance of his wife Joanne, developed the computer program and performed the arduous tasks of data entry and analyses.

Mrs. Anne Ruholl, of the Continuing Veterinary Education Section, typed the manuscript and otherwise provided very competent secretarial support.

Special recognition is directed to the 142 veterinarians who had the interest and took the time to complete a lengthy questionnaire and provide valuable commentary.

Appreciation is extended to all these people and others who assisted in less obvious ways.

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REPORT ON CONTINUING VETERINARY EDUCATION IN SASKATCHEWAN

BACKGROUND

> *Possibly more than most professions, veterinary medicine is undergoing major transformations related particularly to societal changes.*
>
> *The relative numbers of mixed practitioners, formerly the backbone of the profession, are in decline, victims of the rural-urban migration of their clientele. Those that continue to practice in rural settings find that the nature of their work has changed with the advent of large, production-oriented livestock units. Urban dwelling small animal practitioners serve a clientele that now expect a level of performance to rival that of the medical profession. It is quite understandable that these changes, coupled with the ever expanding knowledge explosion, have rendered the undergraduate curriculum less relevant and the need for continuing education correspondingly more crucial.* (3)

In 1986, the author was asked to conduct a survey of Ontario veterinarians which had the long-term objective of assisting educators and professional veterinary associations to improve the acceptance and effectiveness of continuing education programs. The resulting study, which was sponsored by the Society of Ontario Veterinarians, the Ontario Ministry of Agriculture and Food and the Ontario Veterinary College involved a survey of 400 Ontario veterinarians and 21 intraprovincial veterinary associations. The *Report on Continuing Veterinary Education in Ontario* (2) was completed in January of 1988.

Recognizing that a good part of the work of conducting a study of this nature is related to design, Dr. Butler proposed to the veterinary medical associations of western Canada that he would voluntarily conduct a similar survey of their memberships if the hard costs of the project were underwritten by the associations. The British Columbia and Saskatchewan associations agreed to the proposal. The Saskatchewan Veterinary Medical Association (SVMA) subsequently applied to the Agricultural Development Fund and was granted financial assistance.

It is hoped that the resulting studies, beside meeting objectives identified above, will generate useful bench-mark data for comparisons of veterinary populations at widely separated geographic locations and comparative data for future studies.

OBJECTIVES OF THE STUDY

Primary Objectives

a) To develop recommendations that would:

   i) improve continuing education programs for Saskatchewan veterinarians;

   ii) enhance the effectiveness of continuing education programs offered by the Western College of Veterinary Medicine.

Secondary Objectives

a) To describe Saskatchewan veterinarians in terms of:

   i) levels of participation in continuing education;

      It is recognized that the methods of continuing education available are clearly of two types; those which do not necessitate leaving the confines of a residence, office or clinic and those that do. Each type was measured independently.

   ii) demographic factors (e.g. age, sex, number of dependants, year of graduation with the D.V.M. degree);

   iii) work-related factors (e.g. income from veterinary practice, hour of work per week, field of employment, type of practice, position in practice);

   iv) attitudes related to continuing education and the veterinary profession;

   v) preferences for scheduling, length and topics for continuing education programs;

   vi) perceptions of obstacles to continuing education.

b) To solicit comments concerning any aspect of continuing education.

Two objectives of the project which were identified earlier have yet to be achieved:

   a) To identify factors that are associated with high (and low) levels of participation in continuing education;

   b) To assess the attitudes of W.C.V.M. faculty toward the value of continuing education.

THE POPULATION

The surveyed population consisted of members of the SVMA who were neither members of the faculty of the Western College of Veterinary Medicine (WCVM) who had joined the SVMA during the twelve months previous.

Members of the faculty of the WCVM and veterinarians who joined the SVMA in 1988 were eliminated from the survey population recognizing that, in each case, their unique requirements for continuing education could bias the findings.

One hundred and eighty-nine veterinarians were judged to satisfy the criteria and constituted the survey population.

THE SURVEY INSTRUMENT AND PROCEDURES

Veterinarians who satisfied the described criteria were surveyed by direct mail.

The direct mail questionnaire was selected as the most appropriate survey instrument recognizing that the population to be studied was scattered over an extensive geographic area.

The 20-page questionnaire (Appendix A) consisted of ten sections:

Part A - Participation in Continuing Education;

Part B - Attitudes and Feelings Concerning Continuing Education and the Veterinary Profession;

Part C - Perceived Obstacles to Continuing Education;

Part D - Demographic and Work-related Information;

Part E - Financing Continuing Education;

Part F - Mandatory Continuing Education;

Part G - Western College of Veterinary Medicine;

Part H - Preferences for Continuing Education Scheduling;

Part I - Perceived Effectiveness of Continuing Education Methods;

Part J - Preferences for Continuing Education Topics.

An additional sheet of paper was provided for the respondent to record written comments on any aspect of continuing education.

The reader is referred to the questionnaire for details concerning the wording of individual questions.

The period studied was from September 1, 1987 to August 31, 1988.

Seven days prior to the mailing of the questionnaires, a letter which was signed by the President of Saskatchewan Veterinary Medical Association was mailed out to the survey population. The purpose of the latter was to outline the purpose of the study and to encourage participation.

A similar encouraging letter signed by the study organizer along with the questionnaire and a return-addressed, postage-paid envelope was mailed out on September 15, 1988.

Anonymity of the respondents was assured by assigning an unrelated code number to each completed questionnaire as it was received. However, a system was used which permitted identification of those who had responded to the survey. It was thus possible to send a second request, dated October 25, 1988 to non-responders.

A second mailing to non-responders which included a questionnaire and return-addressed, postage-paid envelope was mailed on November 29, 1988.

The deadline for receipt of questionnaires was extended to January 31, 1989 to accommodate late responders.

LIMITATIONS OF THE STUDY

It is acknowledged that factors which could have a significant effect on participation may have been omitted from this study. Those that have been included were ones which seemed most useful to explore as prompted by previous studies and the author's personal experience.

The levels of participation were examined only for a twelve-month period. This limitation was imposed recognizing that the ability to recall factual information decreases with time. Sheffield (9) noted in his study of adult learners, "Many honest, sincere respondents may not have been reported with absolute accuracy the activity prior to the last twelve months".

Despite the high response rate, the non-responders may well, as a group, co-represent a particular sector of the surveyed population.

No attempt was made to assess the educational value of the different educational methods used. The only criterion used to measure participation was that of time.

ANALYSES OF DATA

Values related to hours of participation, demographic and work-related information were recorded directly. Means, standard deviations and medians were calculated as appropriate.

Measurement of perceptions, attitudes and feelings was accomplished by asking respondents to indicate their reactions to statements and questions by circling the appropriate number on seven-point scales. Each scale had verbal descriptors assigned to the terminal values. Mean scores were used to indicate attitudinal positions.

All numeric data were recorded on a computer-based spreadsheet and data were computer analyzed using the Statistical Package for the Social Sciences, SPSS Inc., Chicago, Illinois.

Written comments were categorized and identified by each respondent's coded number. The respondents provided a wealth of written commentary to the extent that it proved impractical to remark on all but a few. The reader is encouraged to review that section of the report in which the comments are recorded.

The sections of the study are presented in the order that they appeared in the questionnaire.

Tabulated data along with the author's observations are presented together.

The respondents' written comments are presented as *Appendix A*.

The questionnaires are attached as *Appendix B*.

Of the 189 veterinarians in the survey population, 142 returned questionnaires containing usable information, constituting a response rate of 75 per cent.

TABULATED DATA

AND

OBSERVATIONS

PART A - PARTICIPATION IN CONTINUING EDUCATION

1) FOR CONTINUING EDUCATION METHODS PARTICIPATED IN AT THE HOME, OFFICE OR CLINIC (AT HOME)

TABLE 1

ESTIMATED HOURS OF PARTICIPATION IN CONTINUING EDUCATION (AT HOME)

Form of Participation	N	Hours of Participation (per month) Mean*	Min.*	Max.*	Mode*
a) reading professional journals, papers, magazines, brochures	142	9.3	1	60	3
b) reading textbooks on professional subjects	136	4.3	1	50	2
c) reading unsolicited medical literature	126	1.4	1	18	1
d) viewing videotapes	111	0.2	1	2	1
e) listening to audiotapes or records	111	0.3	1	20	1
f) broadcast radio or television programs	31	2.5	1	10	1
g) viewing slide sets	6	1.1	1	2	1
h) correspondence courses	2	11.5	3	20	3
i) discussions and/or correspondence (e.g. with colleagues)	117	5.2	1	32	1
m) other methods	8	2.4	1	4	2
ALL FORMS (AT HOME)	142	28.5	2	126	7

* Mean, minimum, maximum and mode figures represent values which were calculated only for those respondents using the method.

OBSERVATIONS AND COMMENTS ON TABLE 1

All respondents indicated that they spent, on average, 28.5 hours in the home environment participating in continuing education. This figure compares with 23 hours for veterinarians in Ontario (2).

The noticeable spread between median and mode values indicate that there was considerable disparity among levels of participation.

Reading professional journals, magazines and brochures was by far the most popular method.

The low level of participation in "discussions and correspondence (e.g. with colleagues) might indicate that a high percentage of the respondents work alone.

Other forms of participation (at home) identified by the respondents included: producer and industrial literature; *Animed* computer orientation; analysis of practice-generated data; in-clinic meetings with producers.

PARTICIPATION IN CONTINUING EDUCATION

2) FOR CONTINUING EDUCATION METHODS PARTICIPATED IN AWAY FROM THE HOME, OFFICE OR CLINIC (AWAY FROM HOME)

TABLE 2

ESTIMATED HOURS OF PARTICIPATION IN CONTINUING EDUCATION (AWAY FROM HOME)

Form of Participation	N	Hours of Participation (per year) Mean*	Min.*	Max.*	Mode*
a) local and regional society meetings	40	6.0	1	30	4
b) provincial association meetings	75	9.5	2	40	6
c) federal association meetings	79	15.0	2	40	10
d) WCVM - sponsored meetings	25	10.6	3	24	16
e) other academic institutions	17	23.1	2	122	10
f) foreign meetings	29	29.6	4	188	20
g) other meetings	23	15.9	1	40	4
ALL FORMS (AWAY FROM HOME)	126	31.9	2	212	30

* Mean, minimum, maximum and mode figures represent values which were calculated only for those respondents using the method.

OBSERVATIONS AND COMMENTS ON TABLE 2

All respondents indicated an average of 32 hours per year of participation (away from home). This figure compares with 35 hours for veterinarians from Ontario (2).

The number of Saskatchewan veterinarians in attendance at federal meetings would be higher than usual as the 1988 annual meeting of the Canadian Veterinary Medical Association was held in Saskatoon during the period surveyed.

Saskatchewan veterinarians participated in a wide range of educational meetings including: Agriculture Canada seminars; postgraduate classes; game farming symposia; the Alberta Sheep Symposium; the Delta (B.C.) equine symposium; University of Minnesota conferences; the Bison Workshop (Montana); the Saskatchewan Swine Symposium; Western Veterinary Conference (Las Vegas); *TUCO* seminars; *ANIMED* Users' Meeting; and practice management seminars.

Many attended meetings of professional societies such as: the Western Canadian Association of Equine Practitioners; the Western Canadian Association of Swine Practitioners; American Veterinary Medical Association; American Animal Hospital Association; American Association of Bovine Practitioners; American Association of Swine Practitioners; American College of Veterinary Surgeons; International Embryo Transfer Society; and Research Workers in Animal Diseases; the Wildlife Diseases Association (Georgia).

PART B - ATTITUDES AND FEELINGS CONCERNING CONTINUING EDUCATION AND THE VETERINARY PROFESSION -

TABLE 3

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES OF SCORES FOR ATTITUDES AND FEELINGS CONCERNING CONTINUING EDUCATION AND THE VETERINARY PROFESSION

Perception of the Importance of Participation in Continuing Education as it is Related to:	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
a) ability to earn a living	140	51	41	9	2
b) prestige in the community	140	16	53	31	3
c) respect of family/friends	140	20	57	23	3
d) respect of colleagues	144	62	32	6	2
e) competence in practice	139	77	20	3	1
f) personal development	144	79	19	2	1
g) job satisfaction	144	76	23	1	1

* a score value of '1' indicated "very important"
a score value of '7' indicated "not important at all"

OBSERVATIONS AND COMMENTS ON TABLE 3

The respondents regarded participation in c.e. as having an important relationship with each of the parameters investigated but particularly for "personal development", "competence in practice" and "job satisfaction".

"Prestige in the community" and "respect of family and friends" were each regarded as being less relevant.

These findings are consistent with those of the Ontario study (2).

TABLE 4

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES OF SCORES FOR FEELINGS ABOUT HAVING CHOSEN VETERINARY MEDICINE AS HIS/HER PROFESSION

	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
Satisfaction With Having Chosen Veterinary Medicine as His/Her Profession	140	60	32	8	1

* a score value of '1' indicated "very satisfied"
a score value of '7' indicated "very dissatisfied"

TABLE 5

PERCENTAGE DISTRIBUTION AND MEDIAN VALUE OF SCORES FOR FEELINGS ABOUT THE FUTURE (TEN YEARS FROM NOW) OF THE VETERINARY PROFESSION

Feelings About the Future of the Veterinary Profession as It Will Be Related To:	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
a) salaries for veterinarians	140	12	72	16	4
b) prestige of veterinarians in the community	140	24	71	5	3
c) usefulness of veterinarians to society	140	58	39	3	2
d) potential of offering maximum opportunity for personal development	140	29	64	7	3

* a score value of '1' indicated "very optimistic"
a score value of '7' indicated "very pessimistic"

OBSERVATIONS AND COMMENTS ON TABLE 4

Sixty per cent of the Saskatchewan respondents indicated satisfaction with their chosen profession; only eight per cent appeared dissatisfied.

These figures compare with 74:3 for veterinarians in Ontario (2).

OBSERVATIONS AND COMMENTS ON TABLE 5

Only 12 per cent of Saskatchewan respondents were optimistic about future salaries for veterinarians as compared with 16 per cent who were pessimistic. The 23 per cent of Ontario veterinarians (2) who registered optimism might reflect a more buoyant economy.

Approximately five times as many Saskatchewan respondents appeared optimistic (as opposed to pessimistic) with respect to future prestige of veterinarians in the community. The ratio found in the Ontario study (2) was 38:5.

Saskatchewan respondents were very positive in their perception of the future usefulness of veterinarians to society - 58:3. A similar observation (64:1) was made in the Ontario study (2).

Although most Saskatchewan respondents were ambivalent in their view of the veterinary profession as one which had the potential of offering maximum opportunity for personal development, those who were optimistic outnumbered the "pessimists" by a margin of four to one. The ratio for Ontario (2) was 32:6.

TABLE 6

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES OF SCORES FOR FEELINGS HIS/HER PERSONAL FUTURE IN THE VETERINARY PROFESSION

	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
Feelings About His/Her Personal Future in the Veterinary Profession	144	47	46	6	2

* a score value of '1' indicated "very optimistic"
a score value of '7' indicated "very pessimistic"

TABLE 7

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES OF SCORES FOR PERCEPTIONS OF SPOUSE'S ENCOURAGEMENT OF PARTICIPATION IN CONTINUING EDUCATION

Perceived Encouragement of Spouse for Participation in Continuing Education	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
a) for programs participated in at home or office	123	52	48	0	2
b) for programs which necessitated absence from home	123	51	42	7	2

* a score value of '1' indicated "very encouraging"
a score value of '7' indicated "very discouraging"

OBSERVATIONS AND COMMENTS ON TABLE 6

Saskatchewan respondents were generally optimistic about their future in the veterinary profession (47:6).

Ontario respondents (2) recorded even higher levels of optimism - 59:2.

OBSERVATIONS AND COMMENTS ON TABLE 7

Respondents in all three studies indicated that they felt their spouses encouraged them to participate in continuing education, especially for programs which did not necessitate absence from home.

The Ontario study (2) concurred with these observations.

PART C - PERCEIVED OBSTACLES TO CONTINUING EDUCATION

1) FOR PROGRAMS HELD AT HOME

TABLE 8

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES OF SCORES FOR RESPONDENTS' PERCEPTIONS OF OBSTACLES TO CONTINUING EDUCATION

Perception of the Importance Selected Obstacles to Continuing Education	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
FOR PROGRAMS HELD AT HOME					
a) most of what is available is of little practical value	144	16	58	25	4
b) need to spend more time with family	144	36	45	19	3
c) difficulty understanding the material	138	4	57	39	6
d) too much work to do	139	37	47	16	3
e) most programs are not sufficiently focused on areas of interest	138	24	56	20	4
f) too many interruptions	139	31	45	24	4
g) too many competing interests	133	44	47	9	3

* a score value of '1' indicated "extremely important"
a score value of '7' indicated "not important whatsoever"

OBSERVATIONS AND COMMENTS ON TABLE 8

Generally speaking, most respondents were ambivalent as to the importance of obstacles which were listed.

"Too many competing interests", "too much work to do" and "need to spend more time with family" were identified as the more important obstacles to participation in the **home** environment. These findings agree with the Ontario study (2).

It would appear that major impediments to participation "at home" relate to a shortage of time.

"Difficulty understanding the material" was not identified as a major problem. Only four per cent of the respondents saw it as being important.

Obstacles not listed in the questionnaire but which were identified by the respondents included:

"not much available except written materials;
don't know how poor the material is until I have wasted time on it;
inability to focus on study-oriented tasks; and
cost".

TABLE 8 (continued)

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES OF SCORES FOR RESPONDENTS' PERCEPTIONS OF OBSTACLES TO CONTINUING EDUCATION

Perception of the Importance Selected Obstacles to Continuing Education	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
2) FOR PROGRAMS HELD AWAY FROM HOME					
a) most of what is available is of little practical value	138	12	51	36	5
b) need to spend more time with family	138	25	51	23	4
c) difficulty understanding the material	139	0	28	72	6
d) too much work to do	137	31	47	22	3
e) most programs are usually held at a busy time of year	140	27	49	24	3.5
f) the cost is usually too high	139	20	52	27	4
g) too many competing interests	139	28	56	16	3
h) distances to travel are usually excessive	140	25	52	22	3
i) most programs are not sufficiently focused on areas of interest	137	17	52	31	4

* a score value of '1' indicated "extremely important"
a score value of '7' indicated "not important whatsoever"

OBSERVATIONS AND COMMENTS ON TABLE 8 (continued)

As was noted for obstacles to c.e. (at home), most respondents were ambivalent with regards to the obstacles affecting participation away from the home environment.

"Too much work to do", too many competing interests" and "distances to travel are usually excessive" were identified as the most important obstacles. "Most programs are usually held at a busy time of year" was also identified as being of concern.

Respondents in the Ontario study (2) registered similar concerns.

Other obstacles which were not listed in the questionnaire but which were identified by the respondents include:

"no tax relief for salaried veterinarians;
poor publicity re: local programs;
government restriction to travel out of province;
my boss does not send me;
inappropriate topics;
one person practice - leave and the competition takes over; and
no provision to take time off work except holiday time".

PART D - DEMOGRAPHIC AND WORK-RELATED INFORMATION

TABLE 9

PERCENTAGE DISTRIBUTION BY RESPONDENTS BY AGE (AS OF SEPTEMBER 1, 1988)
N = 142

Age Groups	Percentage Distribution
<26	0
26 to 30	14
31 to 35	24
36 to 40	27
41 to 45	15
46 to 50	8
51 to 55	4
56 to 60	5
61 to 65	2
>65	1

Mean - 39.1 Std. Dev. - 8.9 Min. - 26 Max. - 67

TABLE 10

PERCENTAGE DISTRIBUTION BY RESPONDENTS' BY SEX
N = 142

Sex	Percentage Distribution
Male	76
Female	24

OBSERVATIONS AND COMMENTS ON TABLE 9

The average age of respondents in both studies was very similar: Saskatchewan - 39.1; Ontario (2) - 39.9.

Sixty-five per cent of Saskatchewan respondents were 40 years of age or younger; a youthful profession when it is recognized that each member will have at least six years of University education.

This skewing of the population toward the younger age was probably influenced by the establishment of the Western College of Veterinary Medicine which graduated its first class in 1969.

OBSERVATIONS AND COMMENTS ON TABLE 10

Female veterinarians now make up a sizeable proportion of the veterinary profession. The 24 per cent female population compares 24 per cent for Ontario (2).

One could predict with confidence that the proportion of women in the profession will increase in the future. Classes at the W.C.V.M., indeed in most veterinary colleges in the United States and western Europe, usually have in excess of 60 per cent women.

TABLE 11

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY YEAR IN WHICH HE/SHE RECEIVED THE D.V.M (OR EQUIVALENT) DEGREE
N = 142

Year Groups	Percentage Distribution
1984-88	14
1979-83	20
1974-78	26
1969-73	20
1964-68	6
1959-63	6
1954-58	4
1948-53	12

TABLE 12

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY INSTITUTION FROM WHICH D.V.M. WAS RECEIVED
N = 140

Institution*	Percentage Distribution
O.V.C.	19
St. Hy.	1
W.C.V.M.	74
Other	6

OBSERVATIONS AND COMMENTS ON TABLE 11

It should come as no surprise that the percentage distribution of the respondents for this variable closely paralleled that for age.

OBSERVATIONS AND COMMENTS ON TABLE 12

Approximately three-quarters of the respondents were W.C.V.M. graduates. Since enrolment of western Canadian students is almost nonexistent at other Canadian veterinary colleges, one could safely predict that this proportion will become greater with the passing years.

W.C.V.M. graduates made up only one per cent of the respondents in the Ontario study (2).

TABLE 13

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY NUMBER OF DEPENDENTS
N = 142

Number of Dependents	Percentage Distribution
0	16
1	13
2	16
3	29
4	17
5	6
more than 5	1

Median - 3

TABLE 14

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY
ANNUAL INCOME FROM VETERINARY PRACTICE ALONE
N = 135

Annual Income (dollars)	Percentage Distribution
under 10,000	3
10,001 to 20,000	7
20,001 to 30,000	16
30,001 to 40,000	19
40,001 to 50,000	13
50,001 to 60,000	15
60,001 to 70,000	7
70,001 to 80,000	10
90,001 to 100,000	3
100,001 to 110,000	1
over 110,000	1

Median - $41,500 (assumes a normal distribution in the category)

OBSERVATIONS AND COMMENTS ON TABLE 13

Ontario respondents (2) reported a median of three dependents.

OBSERVATIONS AND COMMENTS ON TABLE 14

The average salary for respondents was estimated to be approximately $44,000.

Forty-five per cent of the respondents reported annual salaries of $40,000 or less; one-quarter earned less than $30,000 per year.

These figures appear inequitably low taking into account the level of education of the respondents and the high number of hours worked (Table 16).

One might assume that a high proportion of the ten per cent reporting earnings of under $20,000 were employed on a part-time basis.

The 1985/86 median and estimated mean salaries of Ontario respondents (2) were $42,240 and $47,600 respectively.

TABLE 15

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY ESTIMATED PERCENTAGE OF PERSONAL INCOME DERIVED FROM NON-VETERINARY ACTIVITIES
N = 65

Estimated Percentage of Non-veterinary Income	Percentage Distribution
0	45
1 to 10	36
11 to 20	8
21 to 30	4
31 to 40	1
41 to 50	2
51 to 60	0
61 to 70	1
71 to 80	2
81 to 90	1
over 90	2

OBSERVATIONS AND COMMENTS ON TABLE 15

Over 80 per cent of the respondents indicated that no more ten per cent of their personal income was derived from non-veterinary activities. Only six per cent earned over half of their income from outside sources.

Eighty-two per cent of the Ontario veterinarians indicated that less than ten per cent of their incomes were acquired from non-veterinary sources.

These figures discount the claim sometimes heard that veterinarians turn to non-veterinary activities to support their livelihood.

TABLE 16

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY
ESTIMATED HOURS WORKED PER WEEK
N = 135

Estimated Hours Worked per Week	Percentage Distribution
1 to 10	5
11 to 20	2
21 to 30	4
31 to 40	14
41 to 50	25
51 to 60	32
61 to 70	13
71 to 80	3
81 to 90	2

Mean - 50.1 Std. Dev. - 16.4 Median - 50

TABLE 17

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY
POPULATION OF CITY/TOWN WHERE OFFICE IS LOCATED
N = 140

Population of City/Town	Percentage Distribution
less than 500	9
501 to 1,000	11
1,001 to 5,000	26
5,001 to 10,000	8
10,001 to 20,000	10
20,001 to 50,000	9
50,001 to 100,000	0
100,001 to 250,000	27

OBSERVATIONS AND COMMENTS ON TABLE 16

Just over half the respondents worked over 50 hours per week; 18 per cent worked over 60 hours per week!

The figures for the Ontario study (2) were very similar: mean and median values of 50.7 and 50 respectively.

OBSERVATIONS AND COMMENTS ON TABLE 17

Over a quarter of the respondents lived in Regina and Saskatoon.

Forty-six per cent resided in communities of 5,000 or less.

Twenty per cent were residents of communities having fewer than 1,000 people!

TABLE 18

PERCENTAGE DISTRIBUTION OF RESPONDENTS BY FIELD OF EMPLOYMENT
N = 142

Field of Employment	Percentage Distribution
practitioner	80
federal government	15
provincial government	3
municipal government	0
academic institution	1
industry	0
postgraduate	0
retired	0
unemployed	1
other	1

OBSERVATIONS AND COMMENTS ON TABLE 18

Private practitioners and government-employed veterinarians constituted 98 per cent of the respondents.

TABLE 19

PERCENTAGE DISTRIBUTION OF PRACTITIONER - RESPONDENTS' BY ESTIMATED PERCEPTION OF TIME SPENT IN SPECIES-RELATED PRACTICE
N = 118

Estimated Percentage of Time Spent	Percentage of Practitioner-Respondents			
	Food Animal Practice	Small Animal Practice	Equine Practice	"Other" Practice
100	4	23	0	0
96 to 99	2	2	0	0
91 to 95	2	1	0	0
86 to 90	5	1	0	0
81 to 85	5	0	0	0
76 to 80	11	1	0	0
71 to 75	9	1	1	0
66 to 70	3	1	0	0
61 to 65	1	0	0	0
56 to 60	3	5	0	0
51 to 55	2	1	0	0
46 to 50	6	8	1	0
41 to 45	5	3	0	0
36 to 40	6	4	1	0
31 to 35	1	3	0	0
26 to 30	4	3	2	0
21 to 25	3	3	2	0
16 to 20	2	9	2	0
11 to 15	0	7	6	0
6 to 10	1	10	21	1
1 to 5	1	9	31	12
0	25	6	36	87
Mean	47.6	45.3	6.5	0.4
Median	50	37	5	0
Mode	0	100	0	0

OBSERVATIONS AND COMMENTS ON TABLE 19

The amount of collective effort of the profession that is given over to small animal practice might appear disproportionately high for what is generally regarded as an agricultural province.

Just under one quarter of the respondents spent 100 per cent of their time in small animal practice while only four per cent were completely occupied with food animal practice.

PART E - FINANCING CONTINUING EDUCATION

TABLE 20

PERCENTAGE DISTRIBUTION OF RESPONDENTS' FEELINGS REGARDING THE AMOUNT OF MONEY A VETERINARIAN SHOULD BE PREPARED TO SPEND ON CONTINUING EDUCATION
N = 137

Amount of Money Which a Veterinarian Should Be Prepared to Spend on C.E. (dollars annually)	Percentage Distribution of Respondents
under 100	0
100 to 500	18
501 to 1,000	38
1,001 to 1,500	21
1,501 to 2,000	12
2,001 to 2,500	6
2,501 to 3,000	2
3,001 to 3,500	2
over 3,500	1
Median Range - $501 to 1,000	
Mode Range - $501 to 1,000	

OBSERVATIONS AND COMMENTS ON TABLE 20

Fifty-six per cent of the respondents indicated a figure of $1,000 as an appropriate ceiling figure for a veterinarian's c.e. budget.

This amount would place serious constraints on attendance at any meeting which necessitated travel outside of the province.

TABLE 21

PERCENTAGE DISTRIBUTION OF RESPONDENTS' LEVELS OF AGREEMENT TO STATEMENTS RELATED TO FINANCING CONTINUING EDUCATION (C.E.)

Statements	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
a) Generally speaking, c.e. is far too expensive.	141	11	49	39	5
b) The cost of c.e. should be paid entirely by those who participate.	140	44	40	16	3
c) Veterinary c.e. should be subsidized by the provincial government.	141	20	39	41	4
d) Veterinary c.e. should be subsidized by the federal government.	141	21	38	42	4
e) Part of the fees paid to the S.V.M.A. should go to subsidize c.e.	141	41	34	25	3
f) The Western College of Veterinary Medicine should subsidize veterinary c.e.	141	14	53	32	4
g) The pharmaceutical industry should support veterinary c.e.	140	45	43	12	3

* a score value of '1' indicated "completely agree"
a score value of '7' indicated "totally disagree"

OBSERVATIONS AND COMMENTS ON TABLE 21

On the whole the respondents felt that the cost of c.e. was not unreasonable. Over three times as many respondents disagreed with the statement,"generally speaking, c.e. is far too expensive", as agreed with it.

There appeared to be some incongruity with respect to the arrangements for c.e. financing. Forty-four per cent of the respondents felt that the cost of c.e. should be paid entirely by the participants. However, 45 per cent indicated that the pharmaceutical industry should support veterinary c.e. Does this suggest that a sizeable element in the veterinary profession believes that industry should feel obligated to earmark a portion of their revenue to support professional education?

Forty-one per cent of the respondents agreed that part of the fees paid to the S.V.M.A. should be used to support c.e. This is quite understandable recognizing that professional development is a acknowledged responsibility of the Association.

Approximately twice as many respondents opposed the notion that c.e. should be subsidized by either level of government or the W.C.V.M. although, with respect to the latter, over half were ambivalent.

Ontario respondents (2) had similar views with respect to government and association support. A higher proportion of that group regarded c.e. as being too expensive.

PART F - MANDATORY CONTINUING EDUCATION

TABLE 22

PERCENTAGE DISTRIBUTION AND MEDIAN VALUE OF SCORES INDICATING RESPONDENTS' FEELINGS ABOUT INTRODUCTION OF MANDATORY PARTICIPATION AS A REQUIREMENT TO MAINTAIN LICENSURE
N = 141

	Percentage Distribution of Respondents' Scores 1\2	3\4\5	6\7	Median
	35	35	30	3

* a score value of '1' indicated "strongly in favour"
  a score value of '7' indicated "strongly opposed"

TABLE 23

PERCENTAGE DISTRIBUTION OF RESPONDENTS OPINIONS AS TO THE MINIMUM NUMBER OF HOURS OF C.E. THAT SHOULD BE REQUIRED ANNUALLY TO MAINTAIN LICENSURE
N = 132

Number of Hours That Should be Required	Percentage of Respondents
less than 4	8
4	5
8	7
12	24
16	14
20	12
24	15
more than 24	15
Median 16	
Mode 12	

OBSERVATIONS AND COMMENTS ON TABLE 22

Respondents were just about equally divided among those who were in favour, those who were opposed and those who were ambivalent concerning introduction of mandatory c.e.

The written comments tended to be weighted against mandatory c.e. Solo practitioners were especially concerned about leaving their practices unattended.

OBSERVATIONS AND COMMENTS ON TABLE 23

Seventy per cent of the respondents indicated that 20 hours per annum or less would be an adequate level of participation to retain licensure. This figure would represent only two-thirds of the reported average hours of participation - away from home. (Table 2)

TABLE 24

PERCENTAGE DISTRIBUTION OF RESPONDENTS OPINIONS AS TO THE MAXIMUM PERCENTAGE OF "INFORMAL" HOURS THAT SHOULD BE RECOGNIZED FOR CREDIT

N = 128

Percentage of "Informal" Hours That Should be Recognized	Percentage of Respondents
0	20
20	20
40	23
60	16
80	12
100	9

Median - 40 per cent

Mode - 40 per cent

OBSERVATIONS AND COMMENTS ON TABLE 24

There was not consensus concerning the percentage of "informal" hours that should be counted for credit but both the mean and median values were *40 per cent*.

PART G - WESTERN COLLEGE OF VETERINARY MEDICINE

TABLE 25

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS FEELINGS ABOUT C.E. ACTIVITIES THAT SHOULD BE EMPHASIZED AT THE WESTERN COLLEGE OF VETERINARY MEDICINE

C.E. Activity	N	Percentage Distribution of Scores*			Median
		1/2	3/4/5	6/7	
a) Regional Meetings	140	76	19	4	2
b) On-Campus Wet Labs	139	50	43	7	3
c) Audio-Visual Library	139	63	32	5	2
d) June Conference	139	52	39	9	2
e) Postgraduate Diploma Class	138	30	59	11	3
f) C.E. Newsletter	140	69	27	4	2

* a score value of '1' indicated "should be given strong emphasis"
a score value of '7' indicated "should receive no consideration"

OBSERVATIONS AND COMMENTS ON TABLE 25

All of the listed activities, with the exception of the postgraduate diploma program, received substantial support. Sixty per cent of the respondents were ambivalent with regards to the diploma program although supporters outnumbered the non-supporters by approximately three to one.

The concept of offering regional meetings was strongly supported despite the fact that the S.V.M.A. discontinued the regional program approach in 1987 due to lack of attendance.

The c.e. newsletter, audio-visual library, June conference and on-campus wet labs were all strongly supported.

PART H - PREFERENCES FOR CONTINUING EDUCATION SCHEDULING

TABLE 26

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS PREFERENCES FOR C.E. SCHEDULING

	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
Days of the Week					
Sunday	129	33	19	48	5
Monday	123	20	51	28	4
Tuesday	127	17	58	25	4
Wednesday	125	22	60	18	4
Thursday	128	40	47	8	3
Friday	127	54	34	12	2
Saturday	130	61	25	14	2
Months of the Year					
January	132	64	21	14	2
February	127	39	32	29	3
March	127	17	21	62	7
April	126	10	23	67	7
May	126	10	29	61	6
June	128	23	46	32	4
July	129	35	33	33	4
August	131	39	28	32	4
September	132	51	35	14	2
October	128	16	45	39	4
November	128	23	37	40	5
December	127	12	33	54	6

* a score value of '1' indicated "highly preferred"
a score value of '7' indicated "not acceptable"

OBSERVATIONS AND COMMENTS ON TABLE 26

Days of the Week

Saturdays and Fridays followed by Thursdays were identified as the preferred days for attending c.e. programs. Sunday was the least popular.

Months of the Year

The preferred months which were identified were January and September followed by February.

April and March followed by December and May were least acceptable.

TABLE 26 (continued)

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS PREFERENCES FOR C.E. SCHEDULING

	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
Program Length					
Morning	124	32	38	30	4
Afternoon	124	46	46	8	3
Evening	125	40	40	20	3
Half-Day	118	40	47	13	3
One Day	126	60	37	3	2
Two Days	131	63	32	5	2
Three Days	127	30	49	21	4
Four Days	125	8	49	43	5
Five Days	124	5	34	61	6
Two Weeks	123	4	19	77	7
Three Weeks	123	4	29	71	7
One Month	124	0	13	87	7

* a score value of '1' indicated "highly preferred"
a score value of '7' indicated "not acceptable"

OBSERVATIONS AND COMMENTS ON TABLE 26 (continued)

Program Length

Two-day and one-day conferences were highly preferred while afternoon, evening or half-day meetings would be acceptable.

Meetings of over two weeks duration would not be at all popular.

PART I - PERCEIVED EFFECTIVENESS OF CONTINUING EDUCATION METHODS

TABLE 27

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS FEELINGS ABOUT EFFECTIVENESS OF C.E. METHODS AT THE WESTERN COLLEGE OF VETERINARY MEDICINE

C.E. Method	N	Percentage Distribution of Scores*			Median
		1/2	3/4/5	6/7	
a) Lectures/Seminars	141	70	30	0	2
b) Wet Labs	141	79	19	1	2
c) C.E. Videotapes	140	44	52	4	3
d) Informal Study Groups	139	41	48	11	3

* a score value of '1' indicated "highly effective"
a score value of '7' indicated "not at all effective"

TABLE 28

PERCENTAGE DISTRIBUTION AND MEDIAN VALUE FOR SCORES INDICATING RESPONDENTS FEELINGS ABOUT HAVING COMPETENT VETERINARIANS, SUCH AS COLLEAGUES, PRESENT C.E. PROGRAMS

	N	Percentage Distribution of Scores*			Median
		1/2	3/4/5	6/7	
	141	38	50	12	2

* a score value of '1' indicated "highly preferable"
a score value of '7' indicated "not at all acceptable"

OBSERVATIONS AND COMMENTS ON TABLE 27

While all methods of c.e. were supported, wet labs followed by lectures/seminars were clearly regarded to be the most effective. The respondents in the Ontario study (2) concur.

The lack of support for c.e. videotapes should be regarded while keeping in mind that the respondents spent, on the average, only two hours per year (Table 1) in this activity. Similarly, it is the author's opinion that Saskatchewan veterinarians would have had limited exposure to *informal study groups*.

OBSERVATIONS AND COMMENTS ON TABLE 28

There was support (38:12) for the notion of having colleagues present c.e. programs. It should be noted, however, that half of the respondents were ambivalent.

TABLE 29

PERCENTAGE DISTRIBUTION AND MEDIAN VALUE FOR SCORES INDICATING RESPONDENTS FEELINGS ABOUT HAVING MEETINGS OF SPECIALTY GROUPS ASSOCIATED WITH PROVINCIAL CONVENTIONS

	N	Percentage Distribution of Scores*			Median
		1/2	3/4/5	6/7	
	141	56	37	7	2

* a score value of '1' indicated "strongly in favour"
a score value of '7' indicated "strongly opposed"

OBSERVATIONS AND COMMENTS ON TABLE 29

The strong support for incorporating meetings of specialty groups into provincial meetings could well reflect the trend to specialized interests within the profession.

PART J - PREFERENCES FOR CONTINUING EDUCATION TOPICS

TABLE 30

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS' PREFERENCES FOR C.E. TOPICS

Topics of Scores*	N	Percentage Distribution 1/2	3/4/5	6/7	Median
SPECIES INTERESTS					
caged birds	118	18	43	39	4
exotic pets	115	14	48	38	4
fish (commercial)	116	8	40	52	6
fish (tropical)	112	10	34	56	6
poultry	116	19	46	35	4
sheep	114	29	43	28	3
wildlife	120	30	49	21	3
zoo animals	114	11	51	38	5
GENERAL TOPICS					
biotechnology	124	37	50	13	3
business management	126	54	38	8	2
computers in practice	126	39	48	13	3
ethics of animal use	127	29	51	20	3
food hygiene	125	21	53	26	4
foreign animal diseases	126	23	48	29	4

* a score value of '1' indicated "of very high interest"
  a score value of '7' indicated "of no interest whatsoever"

OBSERVATIONS AND COMMENTS ON TABLE 30

Summary of Respondents' Interests in Selected Topics

No topics were assigned a rating of '1'.

Topics which were assigned a median value of '2, thus indicating "high interest" for the respondents, included:

Species Interests	none	
General Interests	business management	
Small Animal Topics	skin diseases	urinary diseases
	gastrointestinal d.	diagnostic tests
	radiology (diagnostic)	ophthalmology
Food Animal Topics	respiratory diseases	nutrition
	preventive medicine	infectious diseases
	reproductive disorders	diagnostic tests
	bull evaluation	neonatal diseases
	internal medicine	digestive disorders
	metabolic diseases	surgery
	agricultural economics	
Equine Topics	abdominal pain	respiratory diseases
	lameness (lower limb)	reproductive disorders
	infectious diseases	neonatal diseases
	gastrointestinal dis.	nutrition
	lameness (upper limb)	

Only two topics were rated as having "little interest", both were in the "species interest" group; each was assigned a median value of '6'; fish (commercial) and fish (tropical).

TABLE 30 (continued)

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS' PREFERENCES FOR C.E. TOPICS

Topics	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
SMALL ANIMAL TOPICS					
cardiovascular diseases	105	47	45	9	3
cryosurgery	107	27	58	15	3
dentistry	107	50	45	6	3
diagnostic tests	108	56	40	4	2
endocrine diseases	106	48	46	6	3
ethology	107	39	48	13	3
gastrointestinal diseases	107	57	38	4	2
human/animal bond	107	33	51	16	3
joint diseases	107	37	58	5	3
metabolic diseases	105	46	48	6	3
microsurgery	105	8	56	36	5
neonatal diseases	106	30	62	7	3
neurologic diseases	106	37	48	5	3
nutrition	106	42	51	7	3
oncology	107	35	59	7	3
ophthalmology	106	52	41	7	2
parasitic diseases	106	29	66	5	3
radiology (diagnostic)	109	56	37	6	2
radiology (therapeutic)	105	9	63	29	5
reproductive diseases	106	43	50	7	3
respiratory diseases	107	49	48	4	3
skin diseases	110	74	22	4	2
surgery (orthopaedic)	107	49	43	8	3
ultrasound techniques	107	16	59	25	4
urinary diseases	106	58	39	4	2

* a score value of '1' indicated "of very high interest"
  a score value of '7' indicated "of no interest whatsoever"

TABLE 30 (continued)

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS' PREFERENCES FOR C.E. TOPICS

Topics	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
FOOD ANIMAL TOPICS					
agricultural economics	108	51	38	11	2
buildings and facilities	106	34	53	13	3
bull evaluation	106	61	28	10	2
diagnostic tests	109	61	30	9	2
digestive disorders	105	51	40	9	2
embryo transfer/freezing	106	13	43	43	5
endocrine diseases	104	27	52	21	4
epidemiology	108	45	46	8	3
ethology	106	41	43	16	3
foot diseases	104	34	52	14	3
foreign animal diseases	112	19	54	18	4
infectious diseases	108	67	28	6	2
inherited defects	107	31	49	20	3
internal medicine	107	55	36	8	2
metabolic diseases	106	51	40	9	2
neonatal diseases	105	59	32	9	2
nutrition	107	68	24	7	2
preventive medicine	108	68	24	8	2
record systems	105	41	47	12	3
reproductive disorders	107	67	25	8	2
respiratory diseases	108	69	24	7	2
surgery	104	54	37	9	2
ultrasound techniques	103	18	55	26	4
zoonoses	111	47	42	11	3

* a score value of '1' indicated "of very high interest"
a score value of '7' indicated "of no interest whatsoever"

TABLE 30 (continued)

PERCENTAGE DISTRIBUTION AND MEDIAN VALUES FOR SCORES INDICATING RESPONDENTS' PREFERENCES FOR C.E. TOPICS

Topics	N	Percentage Distribution of Scores* 1/2	3/4/5	6/7	Median
EQUINE TOPICS					
abdominal pain	91	63	30	8	2
dentistry	89	24	62	15	3
diagnostic tests	91	48	45	7	3
electrocardiography	89	3	53	43	5
endocrine disorders	89	21	51	28	4
ethology	90	26	57	18	3
gastroenteric diseases	91	53	37	10	2
infectious diseases	91	55	37	8	2
lameness (lower limb)	89	58	33	9	2
lameness (upper limb)	89	51	39	10	2
law and the veterinarian	87	25	59	16	4
microsurgery	87	5	49	46	5
neonatal diseases	89	54	34	12	2
neurologic diseases	89	39	46	15	3
nutrition	90	52	37	11	2
parasitic diseases	89	40	51	9	3
preventive medicine	91	41	49	10	3
radiology (diagnostic)	89	45	39	16	3
reproductive disorders	90	56	34	10	2
respiratory diseases	92	61	32	8	2
surgery	87	40	46	14	3
therapeutic shoeing	86	33	48	20	3

* a score value of '1' indicated "of very high interest"
  a score value of '7' indicated "of no interest whatsoever"

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Appendix A

COMMENTS

PART E - FINANCING CONTINUING EDUCATION

Financing Continuing Education

Veterinarians should take advantage of C/E to make it pay in practice (S003)

C/E is a personal decision as to what and how much; our SVMA and CVMA fees should not be used here (S006)

For $75 I can get up to 6.0 C/E credits from the Univ. of Pennsylvania School of Vet. Med just by reading and taking the quizzes in The Compendium. Anything competitive from WCVM would be welcomed (S008)

Government subsidization should be aimed at the agricultural sector, i.e. large animal practitioners. Small animal practice should be self supporting the area of continuing education (S013)

I think C/E is mainly the individual's responsibility. However, it should be tax deductible (books, journals, C/E costs) and WCVM should be funded to provide video/audio tapes and material for borrowing. There is never time at meetings to use C/E materials (S017)

The role that already graduated professionals have in acting as liaison between the university and the public can not be overlooked. The extent that this role is recognized as important, the university will dictate how much subsidized C/E is supported by the University (S018)

C/E costs should be tax deductible to all practitioners not just self-employed ones (S020)

Opinion would change drastically if we had legislation making C/E mandatory. If a solo practitioner is forced to leave his/her practice for C/E, someone should pick up the tab and provide a replacement while he/she is absent from the practice (S021)

Federal Government should only pay for C/E for its own veterinarians in job related topics (S022)

Better tax incentives should be available to the individual and/or practice rather than the present punitive restrictions. No restriction on the number of meetings deducted - the cost of meetings and time away restrict attendance anyway (S027)

The cost should be covered by those who will benefit from the C/E. By using a portion of the SVMA fees to subsidize costs, those practitioners that never participate may be inspired to attend and learn something if they are already helping to pay for it (S030)

Governments subsidize a lot of useless projects. Ultimately subsidized education would bring a return in tax dollars from groups served by the veterinary profession (S038)

You forget the employer. My employer is the federal government. I feel my employers will benefit from my attending a continuing education class and should pay part of the costs. Revenue Canada thinks so too! (S057)

The pharmaceutical industry and its involvement in C/E is the biggest evil in this whole issue. Veterinarians are in many ways pawns of the industry (S059)

C/E is really a personal responsibility. It might be necessary to create subsidized programs to encourage development of hot practitioners from recent graduates who show interest but don't have the livestock background (S068)

As a part time practitioner, dollars are a large factor. I would be very happy to attend more seminars if it were not for the cost. Local and regional seminars are often large animal oriented, and the few that are particularly appropriate are usually attended by the principal in the practice (SS069)

All levels of society should contribute to C/E particularly when it is very necessary due to new technology and prohibitively expensive

(S071)
Cost of C/E is the travel and accommodation. I do not feel that the registration fees are unreasonable as a general rule. As an employee, I feel the business should be willing to provide funds for C/E - registration and travel at least if not the entire bill (S072)
There is a wide disparity in salaries/income earned by veterinarians depending on nature of practice and practice location. Accordingly the relative percentage income spent on C/E vary from minor to significant and some practitioners will be excluded from some of the better meetings simply from economic reasons (S073)
C/E is the responsibility of the individual when ever possible. It should be self supporting and if private industry wants to demonstrate new concepts and products it is appreciated (S078)
Most of the costs of C/E should be undertaken by the individuals. The Association should possibly subsidize a portion (S086)
C/E should be at least tax deductible for federal government employees since conference attendance is usually at our own expense (S088)
Salaried individuals are penalized by the tax laws regarding deductibility of C/E expenses (S100)
Possibly government monies and WCVM could use some funds. For video tape education, I'm sure some is used now. But don't feel that there is a direct responsibility (S103)
User pay. Gov. subsidies - tax dollars - my money (S112)
There should be more C/E in Sask. provided by WCVM and other speakers around the province as there used to be (S116)
No free bees. Good direct useful C/E is worthwhile and of good value (S117)
Government/industry should help subsidize the cost of C/E in that both of their institutions benefit. One society benefit by keeping practitioners current and secondly industry benefit in that we are exposed to their latest developments which we employ/market (S118)
There is no good reason why one should pay twice (S120)
I've been to only a few C/E courses where I thought the fee charged was excessive (S121)
Who gains? Charge them all (S136)
WCVM should be willing to participate actively in C/E (availability of faculty and facilities (S137)
More members may attend if they feel they're already paying for some of it (S141)
One of the longest expenses is lost time from practice especially in some practice in rural areas (S143)

PART F - MANDATORY CONTINUING EDUCATION

Legislated C.E.

Difficult to answer; so many factors to be considered (SQ02)
C/E is a personal choice; the public deserves that competent professionals are available; policing ?; quantity vs quality (S006)
Just because it is mandatory doesn't mean that anyone bothers to learn anything. Witness the situation in the USA (S008)
Include C/E participation as part of practice standards inspection (S009)
An adequate amount of courses would have to be attended in multiperson practices. Generally one our to three could go at a time (S015)
I do anyway. Many help to educate or update people who have "burned-out" yet continue to leech off society (S014)
This would interfere with a person's human right according to legislation (S012)
My concern is the expense involved, added to the annual fees paid by veterinarians, makes it more difficult to justify being a practitioner economically (S013)
Unenforceable, like prohibition. It is our own responsibility and we pay the price in careers if we neglect it (S017)
Can be heavy handed and poorly handled particularly with governmental input (S018)
C/E depends on the self respect of each individual. One can sit over articles or in front of videos, answer a few questions in the questionnaire and still not have educated oneself. Much C/E is done over a puzzling case in the clinic. Introducing mandatory time would take the time away from actual clinical cases at hand (S019)
As long as government defrays some of the cost if it is compulsory (S020)
Each situation and practice requirement is different for each individual. Mandatory C/E should not be legislated (S021)
Must be related to field of employment (S022)
I am also supportive of clinical competency examinations conducted every five years (S023)
I feel it is difficult to legislate C/E. People could pay C/E course fees and go to the golf course (S026)
It's about time (S027)
This is one of the few ways to ensure a high standard of veterinary care and a high public profile (S030)
For solo practitioners sometimes your plans for attending are changed at the last minute (S035)
For a solo practitioner costs can be prohibitive, both in paying a salary for a replacement and costs incoherent in travel. (Starting a practice can leave one financially strapped). If this program was in place with adequate subsidization, I would agree with the above totally (S037)
Needed for those who have little self discipline. A person wishing to educate him/her self will do regardless of any mandatory requirements (S038)
I would resent being legislated by body other than SVMA. Also, some allowance for people in new practices where cash flow if tight or where other unavailable circumstances prevented participation (S041)
Provided that more than one avenue can be taken to achieve the assigned level of participation in C/E, i.e. attending seminars and/or correspondence such as through journal "Compendium on C/E for Practicing Veterinarians" (S047)
I would like to think that "professionals" have enough integrity to

maintain an adequate level of competence without being forced to maintain that level (S057)

At least one annually the planned event should be in our area but not during busy season (S058)

Many programs are of little interest and one should not be forced to attend. An average of 6-8 hours a year would be satisfactory (S062)

Voluntary education and creating a desire for education are much more important than forcing (S068)

Only if the costs do not fall on the vets shoulders (S070)

Practitioners should be able to seek C/E that will benefit them and not just have to attend so as to maintain licensure. If made mandatory, I feel there must be some sort of subsidization for C/E (S063)

New technology education, mandatory requiring 3-6 hours annually. Broad base revision 4-12 hours annually (S071)

Should be some flexibility (topics of interest); family situations arise that make C/E difficult in one year but not the next (S072)

You can't legislate knowledge or competence (S076)

How do you relate time to actual quality and involvement (S078)

Informal participation would be hard to evaluate fairly (S088)

It is a free country. The client is very sophisticated and soon will refuse service from incompetents. No need to legislate (S096)

People can't be forced to keep up. Attendance at meetings does not necessarily mean that everything is learned (S102)

Would not work. Forget about this (S103)

This could be a problem with our specialization emphasis and farmers demand it. For some it would be useful. Some full-time vets would find it burdensome if it was on material that isn't what they really need in their particular practice. There's so many stresses on large animal practitioners now and increasingly so. Veterinarians in general seek C/E routinely and need the "space" of having it be their choice (S105)

Who takes over in the one-person practice? (S107)

Each vet is responsible. I continue my education through consultation with WCVM. I don't have time to attend many meetings. I would, however, be happy to watch videotapes (S110)

Provided that education is available within reasonable distance and applicable topics (S111)

Not any of the governmental damn business (S112)

For me it may be a problem if away from home hours are greater than 30-40. Considering costs of hotel, etc. Also married and a farmer spring and fall sessions are tough to attend (S113)

When I practiced in Wisconsin and Missouri they were thinking seriously of this and ask how much a person has done but there are many times more opportunities to take C/E. I have in the past submitted a list of these opportunities to you and have received only a negative response from you and the rest of WCVM (S116)

Absolute farce. Everyone would take it and very few would benefit. Good practitioners get better; poor ones never will (S117)

Some need it more than others. This may ensure a higher uniform standard of competence (S118)

Legislation a peer situation. There are adequate motivations without the burden of restrictive legislation (S120)

Good luck! (1S121)

Although I strongly favor C/E and recognize the need for it, legislation is not the answer. You may be able to enforce attendance at a meeting but you cannot force learning and motivation (S122)

Wouldn't make a bit of difference to the quality of practice. Reason being that points acquired are for paying registration, not attending lectures (S128)

I would be in favour if government were to foot the bill. Also if mandatory, the courses should be held locally (S130)
Enforced practice inspections have not improved practice standards. "Compulsory" just means more bureaucratic hassles and less time spent on other activities - whatever they may be (S132)
If the quality and availability of courses was there (S136)
As professionals we are responsible enough to remain professional without some form of legislation dictating our career development (S138)
Assume that it is meaningful and of benefit to one's practice (S139)
We receive far too much as it is. This would be a definite disadvantage for rural practitioners (S143)
With the amount of new information becoming available some form of C/E is essential to keep up to date (S144)

Minimum Number of Hours of C.E.

Starting point has to be reasonable. Increasing commitment should only come as a result of increased demand by practitioners (S002)
Forty-eight hours (four hours/months) (S004)
Per practitioner in a multi-person practice - this may necessitate the same seminar to be available more than once (S009)
Would depend on topics that were mandatory for a license (S012)
How is it possible to estimate a minimum requirement for an individual or practice? How do you determine (govern) what aspect of C/E is required in an individual situation (S021)
Reasonable to assure an average of two hours would not be too difficult to accommodate (S023)
Two hours per month should be easily attainable for all veterinarians (S024)
To suggest a practitioner can be kept current with a few hours of C/E yearly is a farce. Why bother making C/E mandatory if it is being done as window dressing (S037)
In any group there are people who only take C/E if mandatory (S038)
C/E benefits are determined by what the practitioner derives from it. Mandatory type attitudes will add nothing to the benefits received and are simply expensive bureaucratic hogwash (S040)
Formal hours that can be documented (S045)
Assuming four hours is consistent with attending one scientific session per year (S047)
I am strictly opposed to mandatory C/E. If Mandatory "Formal C/E" would have been imposed for the above time period, I could not have maintained licensure because my employer is an active member of the SVMA Council (S051)
I hope every veterinarian is spending more than two hours per month in reading or listening to or discussing topics on veterinary medicine (S057)
In order to accommodate the various types of practice in the province, it would be necessary to have at least several courses in an 12-month period within reasonable driving distance. If the requirements were for more hours, it would be difficult for many of us to be able to attend a course of interest unless there were a lot going on at the same time (S073)
C/E is a daily process. If the C/E is of interest and presented in an interesting way the practitioner will voluntarily attend (S076)
Minimum three days (S077)
At least a "one day" program (S079)
All formal (S082)
Surely one can spend the equivalent of one day per year in C/E activity

(S085)
Mandatory C/E should be offered at several different times a year so as the individual could choose according to his own timetable (S086)
Mandatory education won't make vets learn anything. The will to learn must be there (S094)
May be difficult for solo practitioners (S095)
Would also make C/E expenses deductible item for salaried individuals (S100)
Do Informal C/E as it best works for you (S110)
A person should be able to meet the requirements at two weekend seminars (S111)
20 hours of formal C/E but it must be available as many different courses at different times of the year (S116)
Cut it out! Mandatory C/E is not going to work. Sloppy practitioners are not going to get better being forced into a learning situation (S117)
Two sessions per year is not unreasonable (S118)
On what conceivable basis would one ever consider such a presumption? Anything less than 24 hours C/E annually is difficult to believe (S120)
It could be higher if the situation I describe in #3 below came about (S121)
It is a total waste of time to force people to learn. If your motivated, you will go and if you are forceful will only result in rebellion (S128)
C/E is a tremendous motivator (S133)
Assume meaningful, concise, of benefit to the practice in question (S139)
A joke unless specialization becomes a real thing. The field is too wide to address otherwise (S141)

Percentage of Allowable "Informal" Hours

Unless substantiated by system, such as compendium on C/E (S004)
Difficult to answer due to policing and individual motivation and we each learn better in different ways (S006)
Too easy to cheat with informal hours (S009)
There is no way of monitoring this type of activity (S010)
Impossible and impractical to keep track of (S012)
In fairness to those in isolated areas, attendance at conferences should not be required at least not every year (S013)
This would keep costs down but encourage everyone to get out to at least one meeting (S017)
On the basis of just attending a conference is not guarantee of going to the lectures in a receptive frame of mind (S020)
Informal hours should be encouraged but not mandatory since veterinarians will probably abuse this aspect of mandatory education (S023)
Cream always rises (S038)
It would be too hard to document informal hours. Better to stay with lower number of total hours C/E as a minimum (S045)
There are some years where attending a formal C/E session is next to impossible (S047)
How are we going to monitor the number of "informal" hours spent by a veterinarian on C/E (S051)
Too hard to enforce. Prefer small number of attendance at formal C/E (S052)
Informal hours such as the quizzes in C/E (S069)
How could one verify without exams (S070)

Informal hours can seldom rate with me. I believe teacher presence is required for questions, etc. even with video/slide tapes (S071)
Fifty percent would be easiest and practice (S072)
It is difficult for a one-person practice to close for formal C/E attendance (S073)
Who's going to police it? (S076)
This is hard to evaluate and control, therefore it is irrelevant. It depends on the sincerity of the individual (S078)
Informal hours, while they can be valuable, are completely non-verifiable and may in fact not be taken at all (S085)
Difficult to access C/E at home (S108)
Dependent on the availability of C/E and the "level" mandated by the Act (S109)
Some record of actual activity should be kept by practitioner (S111)
Thirty percent would be the figure I would chose primarily because it is tough to maintain informal hours (S113)
This has to be left to the practitioners own incentive. One should have to continually write exams. I have done this in the past 24 years and I am sick of it (S116)
As above, a preposterous presumption! One hundred percent of informal hours personally selected in own field of interest if the choice is to pigeon hole people (S120)
If courses were available which had an exam that would be submitted for grading and credit for time spent would be awarded based on passing the exam, then quit a high percent of informal hours could be recognized (S121)
Informal C/E would be very hard to record (S144)

PART G - WESTERN COLLEGE OF VETERINARY MEDICINE

Regional Meetings

Very acceptable format - little travel - time away from practice is minimal and gets practitioners together in each area (S002)
Basically I am in favor but most regional meetings are LA and I am SA (S006)
Costs too high (S008)
The description senerio is ideal for practitioners - should be the emphasis for mandatory C/E (S009)
Of no value to me (S014)
Personality conflicts would be intensified in same regions as well as difference in areas of interest (S012)
Good idea but does not relate much to my own work (S017)
If a minimum of ten attending, I think $100 is a bit high for a half day ($60-$75 is better) (S020)
This is in my opinion a useful method of suppling C/E. It allows each member of the practice an opportunity to attend. Six locations is likely too many - three or four would be adequate (S036)
Topics seem to have a large animal slant with is of no practical use to me (S037)
I feel that this type of C/E is the easiest to get away to and most likely to be taken advantage of by more of the membership (S045)
This type of education is most accessible to practitioners and regulatory vets (S057)
If meetings are close to home they are worthwhile but to travel for two hours one way for a C/E meeting is not worthwhile (S065)
An excellent idea especially since a two or three year plan of rotation could cover a broad spectrum of topics and upcoming events should be planned well in advance (S069)
It may be difficult to find a topic which will be of interest to a lot of practitioners (S063)
Best way to deliver new technology (S071)
Must be highly practical and applicable. Two hours of pure theory in a three hour lecture is of no interest in my situation (S072)
Time of year is important (S073)
Enjoyed this form of C/E when it was done (S075)
This should be a good format even if the group sizes are small (S079)
These are a regional interest and I think are important (S086)
Twice a year during show periods for large animal vets. These small gatherings usually involves everyone and is a good exhange of information and ideas (S091)
Try to avoid spring/late fall (S102)
Much easier for single practitioners to get to (S109)
Single vet practitioners would not have time. I would watch video or participate in conference call meetings (S110)
Should be regional input with respect to topic offered (S111)
The price is outlandish as you would not need $300-350 to pay all your costs but I do feel you should offer wider variety and number of courses (S116)
Costs are too expensive and time lost in solo practice (S119)
Very effective meetings which need cost a fraction of the quoted figure (S120)
These are really useful but attendance is terrible. If C/E were mandatory, they would become very well patronized (S121)
Should be two or three yearly (S135)
Provide good opportunity to interact with neighboring practitioners (S137)

Relatively easy to get to. Where our practice is located, it is usually possible for both practitioners to attend the meetings on different dates (S144)

On-Campus Wet Labs

Both regionals and wet labs should be available (S003)
Costs too high (S008)
Excellent format on an optional basis (S009)
Would have to be given more than once to compensate more people than was available in past. This is quite a task for regular lectures at college and interferes with their spare time (S012)
Good idea but not useful to my work at present. Too expensive if no tax relief (S017)
Unfortunately too time consuming and impractical for the solo practitioner or even the two-person practice. OK for those who live in the city (S021)
Difficult to attend if not in close vicinity to WCVM (S023)
Very useful for subjects that would not lend themselves to regional meeting type meetings (S036)
May really interfere with solo practice (S038)
I have attended two of these and they were great. Very good idea (S041)
These seem to leave a narrow focus (very specialized) for a general practitioner; have not participated because of high cost (S049)
A very effective method of teaching but less accessible because of cost and time. Also, this works best for small groups and therefore reaches only a handful at a time (S069)
Do not restrict lecture hours (S071)
Exactly what is needed? Should offer two or three times for flexibility to practitioners (S072)
Good for some procedures (S075)
OK as long as they are not mandatory (S076)
These are excellent. Orthopedic short course with wet labs was one of the best I have taken (S085)
These are of interest but should not be mandatory (S086)
I attended one wet lab and it was excellent (S104)
Seems expensive (S102)
Better for in-depth single topic courses (S109)
Student/instructor ratio should be kept low (S111)
Doesn't apply much to me at this time but depends on how involved the procdures are (S113)
$200-300 maximum (S116)
If such short courses actually involve the level of expenditure quoted, I for one would not be able to participate regardless of interest in the particular subject matter (S120)
I've attended one of these so far. It ranked among the best C/E course I've every been to. If the topic is good and quality people deliver it, it will draw the crowds (S121)
Should be held in early January or July/August (S135)
Especially available computer record system (S137)
Time of year would be important. Need for these in off season (S139)

Audio-Visual Library

Good idea but I see two problems: 1) procrastination; 2) often a procedure is well written in a text or journal in my library (S006)
Units should focus on current and new disease problems that are being experienced in the field (S009)
This type of material probably tends to be used very little (S010)
If very specific and not general (S014)
Good idea (S012)
Excellent. It his exists now, I am not aware of it (S017)
I think $9 is a bit high priced as there would be quite some variability in lenght of videos, amounts of printed material, dating of topic ($5.00 plus postage) (S020)
Difficult to keep current in many areas (S030)
I do not use this service frequently but I recognize that it is useful and that I should be utilizing it much more (S036)
If it is not on paper or floppy - forget it (S038)
Videotapes and audiocassettes of most use and easiest to use (S041)
Although this should be an expensive effective means of C/E, my experience indicates people do not use this to the fullest and I am disappointed in the quality of material (S057)
It would be greatly appreciated if we could receive an updated list of materials available every 6 months to one year (S058)
Such materials should not be financed by drug companies (S059)
I doubt if any people would be bothered to send for and pick up a unit to view and then have to send it back (S065)
Cassettes are most valuable considering the time that most mixed animal practitioners spend travelling (S067)
On campus wet labs and short courses should be videotapes so as to be able to run on VHS (S063)
Excellent idea. Feel it would be highly utilized if at a reasonable cost (S072)
This avenue should be developed and advertised to the profession. We intend to use this method when the new catalogue is sent in the fall. Most veterinarians have access to VCR and can study the material at their convenience (S075)
Use materials presently generated and do not attempt to reinvent the wheel. Produce new products only when not available (S078)
This program must somehow be brought to the professions attention (S082)
While these may be useful, I have not seen a catalogue of what's available. I know of very few practitioners that make use of them (S085)
Perhaps some of this material could be part of mandatory C/E (S086)
Because of distance, home study is an essential part of C/E (S091)
Excellent (S109)
Maybe we could pay a yearly fee and tapes be sent automatically to us (S110)
Materials should also be available for client education (S111)
Would be great for me. As long as there's at least four hours or so of material (S113)
These would certainly have to be continually updated and new ones purchased as once a tape is listened to it is as old as yesterdays newspaper (S116)
A long time coming. Awareness of the availability and topics most important. Plenty pricey. Not everything must show a profit. Cost recovery program sufficient (S120)
I've never really made much use of this (S121)
Should update a list of available material yearly (S135)

Maybe an aggressive sales approach in combination with one or more drug companies would be real effective (S136)

June Conference

Last conference was disappointing in practical application of material and many speakers that were not knowledgeable to teach at that level (S003)
I prefer in-depth studies in one area rather than an hour or two here and there (S006)
June is not good time for SA practice (S007)
Costs too high; Partial registrations should be permitted (S008)
Good idea. Part of optional C/E multiperson practice may send one to SA session and another to LA session (S009)
A good idea as long as topics are different each year and oriented towards practical information, not academic (S010)
If in my specific area of interest (S014)
Participation would have to be high enough to make these pay and who would organize such an event (S012)
Too expensive (S013)
Expensive if no tax relief (S017)
June is a relatively busy season. How about July/August? (S019)
Could be very useful as long as topics were not totally research oriented, had practical applications, esp. to those practices outside the major city centre (S020)
Good idea (S028)
Timing of the conference is not the best for large animal practitioners as it is still usually fairly busy in June (S036)
I really like this idea provided it is practical in orientation (S037)
Would be excellent if it was held in Sept-Oct. June is always a busy month (S038)
Good idea (S058)
These have been very good in the past (S059)
Very good idea (S060)
Why can I register for a five-day American conference and pay on $100 US? (S067)
This would be OK as long as conferences were on new and innovative things and not just rehashing old ideas (S063)
Would rather the effort go towards wet labs and related lectures (S072)
June is a reasonable time to be away from practice although those of us with children writing June exams might not want to be away. Homecomings are not important to me. The general interst days are essential (S073)
Only if it does not overlap the CVMA to discourage people from participating in the national conference (S078)
One should be able to register on a daily basis (S086)
These longer conferences permit in-depth discussion which cannot be accomplished in a few hours (S091)
Two day - one day schedule makes a long term for a mixed practitioner (S093)
Time of year is not appropriate in my case as a solo practitioner. Still busy and children in school (S098)
Seems expensive for general interest meeting (S102)
Wrong month (S107)
June conference would be more readily attended if held the end of June, i.e. after bull testing season (S108)
Excellent for more in-depth coverage of specific topics (S109)
Excellent. Make it an educational outing with good speakers. At present I attend quite a few spp. meetings. These seem to be where

the best eduational information is obtained (S116)
Registration fees out of line. Look at programs in U.S. (S119)
Go ahead, have a party. What has this to do with C/E. Again, very pricey (S120)
I think these have been very useful to me in the past, and I would plan on continuing to patronize them (S121)
Too expensive for what you can learn and apply (S128)
Rural practitioners aren not free until July (S143)
As it is not usually possible for both my partner and I to attend, he usually goes and I look after the practice (S144)

Postgraduate Diploma Class

Too complicated. Likely some disadvantages (S003)
Difficult to leave practice for extended hours, would prefer to have one week intensive program (S004)
Great for those who have time to attend (S007)
Good opportunity for selected practitioners depending on what is offered (S009)
Good for some but not for me. Good for faculty to stay on top of things and in touch with the profession (S017)
I don't know how valuable a diploma might be to give up two-three weeks holiday time each year and pay $1,300. Would depend on courses offered (S020)
Fine for the individual but not necessary for C/E especially if this becomes mandatory (S038)
Not interested (S052)
I find these very rewarding but it appears that practitioners have difficulty leaving the practice for three weeks (S057)
I feel it is a great idea but I wonder how many practitioners would be able to participate for that length of time (S065)
I would be extremely interested in a class of this sort (S067)
More attractive if classes were more clinically oriented, e.g. cardiology, endocrinology rather than microbiology (S069)
I would be strongly in favor of such a program if it could be expanded so that it would lead to the development of either species specialists or people who were highly proficient with a given species (S063)
Subjects should be varied but the idea should not be considered unless there is satisfactory participation (S071)
I support the concept. In a one-person practice it is a less practical option (S073)
Nutrition; clinical pathology; diagnostic pathology; business management (S078)
Difficult for a lot of practitioners to leave practice but option should still be there (S091)
Difficult as a practitioner to apply this much time (S095)
Bad time for a solo practitioner (S098)
Previous classes valuable for Fed vets looking for post grad education to keep up status/salary. Classes of little value to practitioners (S102)
Wrong month. May and June still calving season for large animal practitioners (S107)
This class could be attended if held during early January or December - too busy in May and June (S108)
Good if the choice of topics is kept fairly broad and some long term indication of topics to be covered over three-five years (S109)
Courses with an emphasis on large animal practice should be held no earlier than June (S111)

May be interested at a later date (S113)
Should not be necessary if rest of C/E is updated. Before you got around to what everybody wanted, they would be collecting their meager old age pension (S116)
Requires substantial commitment of time and money affordable by a select few or those funded and employed outside the practice area. A good program for the serious, well-heeled career employed (S120)
These seem to be mainly for the Agriculture Canada employees (S121)
Have gone this route and found the courses highly beneficial, motivating and applicable to practice (S128)
Probably wouldn't do this but it seems like a sensible way to upgrade ones education and shouldn't be renamed (S136)
I have absolutely no desire to ever write another exam but some people like punishment. To each their own (S142)
Should be July and August. Rural practitioners need to have optimum times available. May and June are convenient to instructors but not many practitioners (S143)

Continuing Education Newsletter

Don't bother (S003)
Add listings of video/audio tapes available for rent (S017)
On-line C/E programs (S038)

Other Programs

Could you utilize cable TV for a program put on once/week or biweekly with C/E topics (S037)
Short courses similar to postgraduate diploma; general review courses for practitioners who have been away from practice for several years (S069)
I believe at a conference, convention, wet labs, etc. a practice tips session where practitioners can present things of interest to them can be presented in an informal way. I generally get as much out of speaking with other practitioners as I do from a conference (S063)
Regular update of textbooks published (S072)
Utilize SVMA newsletter (S093)
Post grad, practitioner-oriented intensive week long seminar in a special interest area is theriogenology (S102)
Don't restrict to WCVM. There are several others in Sask. who are at least one-half competent (S116)
SVMA could circulate video tapes, etc. (S143)

Other Comments

C/E is a matter of SVMA - too much reliance on WCVM. There is more in the vet world than that (S003)
Small round table discussions on specific topic (30-40 mins.) held during conventins and C/E programs would be useful. The medical profession does this on a regular basis (S016)
Education newsletter would be a good idea (S071)
Others like computers, stats, epidemiology, economics, etc. of little value to preventive medicine practice (S102)
I like to be more informed about diseases in Western Canada and anything new coming up (S107)
I spend my C/E dollars on very specific conference subjects. I find general conferences very inefficient and non educating (S133)
Because individual's needs are so varied it seems the place of the WCVM is to respond to demands rather than develop programs and hope the veterinary public will consume them (S141)

PART I - PERCEIVED EFFECTIVENESS OF CONTINUING EDUCATION METHODS

Lectures/Seminars

If the content is of a uniform high quality, lectures/seminars and wet labs are very effective (S001)
A good leacture is the most effective way to transfer new informs`ion (S002)
All depends on the speaker (S005)
Lecture hours should be kept to four hours max a day (S009)
Question period to be included (S010)
Esp. valuable if notes provided so one can listen and concentrate at times (have a review available) (S0202)
Our traditional method of information exchange - everyone has experience learning this way (S030)
If practically oriented can be useful refreshers (S037)
OK for many topics especially if accompanied by handouts (S056)
No substitute for personal contact (S059)
If pertinent data, treatments should be available on handout (S063)
Presentations of case histories (S075)
Speakers must be well organized and enthusiastic (S072)
Proceedings (S078)
This depends highly upon the ability of the speaker (S080)
Can be of great value with an interesting speaker and topic (S086)
Not to academic. Should be practice related (S107)
Many speakers have tunnel vision when it comes to their subject (S119)
Sometimes these are too brief and general in scope to be of much usefulness (S137)
Often they are too research oriented and get bogged down in data; the purpose of the lecture is overshadowed (S138)
Must be interesting topic (S139)
If handout notes provided and speaker does not read presentation (S141)
Not for four hours in a row (S142)

Wet Labs

Orthopedic wet lab opened the door to immediate use of Kirschner apparatus in our practice (S005)
Experience is worth a thousand words (S009)
Student/instructor ratio should be low (S010)
Excellent way to learn (S020)
Perceive this to be effective but time consuming and requiring (often) greater distances to be travelled (S021)
Hands on experience is the best method - offers opportunity for one to one communication (S030)
Finding time to leave practice is difficult (S037)
Experience is a good teacher but difficult to make any wet lab with length only one-half to one day (S047)
Practical hands on experience leaves a good retention in students (S057)
Hands on - great (S058)
No substitute for this type of hands-on activity (S059)
I like labs which are geared to the inexpert rather than the almost expert (S073)
Some topics lend themselves to hands on and therefore this is an effective method (S079)
Learning by doing is important for some subject areas (S086)
Fine but not 300 miles away (S107)
This type of learning is very useful (S111)

Unfortunately a bit restrictive as to numbers able to participate in order to remain very effective (S137)
Topic of interest to one's practice (S139)
Difficult for people of varying experience and abilities to learn equally well (S141)
As long as they are practical (S142)

C/E Videotapes

Not enough person experience to personally evaluate (S006)
Video and voice explanation can be good (S009)
Don't hold ones attention as well as a live lecturer (S010)
Often out of date by the time they're made and distributed (S018)
Good quality is worth looking at more than once (S020)
A passive audience - no opportunity for personal exchange (S030)
Cumbersome (S038)
This has been over rated (S059)
At home (S061)
Ability to replay production in its entirety or any part is an added feature (S072)
Can be of value but often lack personal touch (S086)
Lack of interaction with speaker (S106)
Find us a list of topics available (S107)
Topics and availability must be widely known and regularily updated (S120)
More convenient, often allows more in-depth and organized presentation (S137)
Feedback is not possible (S138)
Good, convenient but lack personal contact and discussion (S139)
At home C/E. Not at a convention (S142)

Informal Study Groups with Colleagues

Peer study groups appeal to me as they tend to relate practicality with sound science (S001)
On brands and practical solutions, many practitioners are extremely innovative - most overlooked area of C/E (S002)
Often turns into story swapping sessions, not my first choice (S010)
Great potential - need discipline (S018)
Can see this being more effective in a city centre (S020)
Must have good relationship between members to succeed (S030)
Good exchange of practical information (S037)
Can get down to the nitty-gritty of a subject (S038)
Good for specialized restricted topics, not so good if turn into jam session (S056)
Our local academy has been very successful in this regard (S059)
Done already (S061)
Would very much depend on sociability, academic level, interest - would work well for some and poorly for others: new graduates who are overwhelmed with formidable colleagues; solo practitioners who are always right and have one way of doing procedures (S072)
Why? The concept is good but such groups degenerate into hero stories rather than useful discussion (S073)
Often difficult to get discussion. It may require an ongoing establishment of study groups so that after a few meetings participants are more open (S079)
Personal contact is important but groups needs specific direction (S086)
Assuming all members have contributions to make and are available to

share information/experience (S102)
If in the proper months (S107)
Require good leadership (S111)
Often degenerate into a fifth chapter of nonspecific not very scientific jargon (S120)
Already involved in one group with six colleagues (S133)
If not coordinated can get off the topic (S138)
Excellent when used properly and guidelines to follow might be of benefit (S139)
Depends on the colleagues you get stuck with (S142)
Often gets more out of informal seminar with colleagues (S144)

Other Methods

Journals, texts, etc. are valuable in keeping up with advances in the profession for personal satisfaction but have less practical application for the dollar and time expended getting to the information of specific interests (S020)
Use of TV medium would be good if it were available to all areas of the province (JS036)
Would really like to see an on-line C/E program. This would eliminate the "time" hassle (S038)
I find any session method is effective when the subject material is interesting and speakers are knowledgeable and skilled at speaking (S048)
Formal study with colleagues following a course (S077)
Home study with a real exam. I've never tried it but it might be interesting. Something along the lines of the College of General Practice I've read about (S121)
Case studies. Inclusion of producer/client perspectives (S137)
Journals and articles geared for the practitioner and very helpful and practical if well written (S138)
Meetings with a large part of time given to informal discussions on the subject (S141)

Colleagues as Teachers

Feel this would result in personality conflicts (S001)
Short topics with specific focus (S002)
Why not (S003)
A resource that has been missed in the past (S005)
Quality; very difficult for most private practitioners to devote enough time to prepare (S006)
"Professional educators" should be good teachers - far too many are not! (S008)
If they have a specific experience they can share meaningfully with us - why not? (S009)
If specific areas of expertise are established, this is a good idea (S010)
As long as they are equally competent, it should not matter (S013)
Some of my colleagues are professional educators. Do you mean private practitioners (S017)
Probably be more practical (S018)
The lack of presentation skills could be compensated for by value to practitioners of the practical and economic experiences of the colleagues (S020)
Who's competent? Most practitioners "perceive" themselves as being as competent as their fellow colleagues (S023)
As a private practitioner they can often present a more realistic approach, i.e. what is done with teaching institutions may not be practical elswhere (S030)
A high number of professional educators live in ivory towers (S038)
Often competent practicing veterinarians can provide information on a topic with more practical consideration than what professional educators do (S047)
I find in a lot of cases practical experience is more educational than a tremendous volume of theory (S051)
Should be encouraged to get more practical input, provided that individuals asked can do a good job (S056)
The quality of a lecture and retention by students is related to the speakers ability to teach more than his knowledge. Educators must be good lecturers (S057)
You should seek our more practitoners for this. It is a wealth of untapped material for C/E (S059)
Their practical experiences can be useful in a C/E situation (S067)
I prefer someone with expertise in teaching. Not all profs at WCVM are good teachers either if any knowledgeable vet is competent at and experienced in teaching, it would be best to use this person (S069)
Colleagues seem to relate better to field situations than do the professional educators (S063)
Competent veterinarian or professional educators is not as important as the kind of presentation (S071)
A small animal practitioner giving practical knowledge and comments to mixed animal practitioners would be quite acceptable (S072)
Who says whom is competent? (S076)
The limitation is content and ability to present information (S078)
If they have an area of specialty (S091)
If they can communicate clearly their information (S100)
Often have good particular approach(swine meetings) (S102)
A competent veterinarian although excellent in his field may be a poor public speaker, unable to capture or hold the attention of his audience (S106)
The practical side if often presented in a better way (S111)
Who decides who is competent? But as long as there was time for

discussion, this probably would be OK (S113)
In the past I have offered at one time considerable expertise in mastitis control and nutrition. I feel WCVM does not want interlopers (S116)
As long as the subject matter was of value, specialty topics or unique areas of interest vs. daily standard practice topics (S118)
Is there or has there ever been any good reason why we should not be given the opportunity to pick such experimental brains (S120)
Most of my colleagues and sometimes myself, would not know beans if the bag were open (S121)
As long as they had ability to teach (S135)
More informal may generate better discussions (S137)
They are more likely to give you the "meat" of the topic (as per my experience with some of them) (S141)
I suspect content of such seminars would be of questionable value. I can look in a book as well as they can. I want new and improved subject matter presente to me (S142)

Specialty Meetings at Conventions

Your mixing up two different things (S003)
Only trial and error will answer how well this will work (S006)
Works well for the CAVP with the CVMA (S017)
Except where it makes the convention too long to be able to get away and attend both (S020)
C/E is for the general practitioner so it has no bearing on time of meeting of specialty group (S038)
This is convenient however, the time away from practice is sometimes too great if attending convention and group meeting (S063)
Length of time away from work is critical. Harder to be away fro longer periods once than several shorter periods (S096)
To avoid duplication of travel (S107)
Formal C/E entails one full day of travel. I prefer to have at least two-three day seminar to make the time worthwhile (S108)
Why schedule around conventions (S118)
Such timing mostly in favour of higher attendance at such provincial conventions (S120)
I can see no problems and it might provide added incentive for attendance (S121)
It would be OK but most people are rushing back to their practices (S139)
It depends on the length of the provincial meeting. If it is already two days, that is long enough (S141)

PART J - PREFERENCES FOR CONTINUING EDUCATION TOPICS

Other Species

Deer Farming (S038)
Game Farming (S063)
Game Farming (S136)

Other General Topics

WCVM lab services available to practitioners; collection and preserving samples from postmortems (S009)
Veterinary education and manpower information (S013)
Current trends in pharmacology; current trends in anesthesiology (S037)
Livestock production (S052)
Pharmacology applied (S072)
Computers and animal production and farm management (S079)
Hospital design; Stress management (S085)
Emphasize practical and applicable C/E. Microsurgery and catscan are not important in rural Saskatchewan (S099)
Zoonoses (S123)

Other Small Animal Topics

Electrosurgery (S005)
Zoonotic Disease (S013)
Pharmacology update (S020)
Reconstructive surgery, i.e skin grafting (S037)
Pharmacology/treatment options; Emergency medicine (S085)

Other Food Animal Topics

Cryptosporidiosis (S009)
Experimental Design; Clinical Pharmacology (S023)
Anesthesia (included with surgery) (S072)
Establishing herd health programs (S085)
Mastitis; Milk quality; extra label drugs/residue prevention (S100)
Varied courses on large animal (S116)
Animal etiology (S120)
Pharmaceuticals (S137)

Other Equine Topics

Proper hoof trimming on normal animals (S009)
Record keeping (S052)
Wound management (S085)

GENERAL COMMENTS

C/E is an important matter (S003)

Strongly in favor of mandatory C/E (S007)

Refusal of current C/E planners to offer partial registration/ participation in programs to be considerably less than appropriate for promotion of C/E and very alienating (S008)

WCVM services (path, clinical path, tox) should prepare a booklet outlining how they wish to have samples handled and received. Price books need not be include (S009)

Veterinarians are becoming more specialized. Need to have specific high cost program with few practitioners (S014)

It is very difficult for a part-time practitioner to justify spending a large amount of money on C/E. Given the average level of earnings of veterinarians, it is hard to justify for even a full-time practitioner even though the concept of C/E is good. It is even more costly for those of us living in isolated rural areas due to the time and travel involved as well as expenses for overnight accommodations. The idea of government subsidized C/E is perhaps a good one but only if it pertains strictly to large animal practice, not to pet animal practice. In Saskatchewan it is always going to be difficult to arrange for good conferences due to the small numbers of veterinarians to support them. I can go to Las Vegas for five days and hundreds of speakers for a lower registration fee than I pay here for a one-day conference. Living in a rural area, it is not much more headache to catch a flight to Las Vegas than to drive all the way to Saskatoon. I like the idea of videotapes very much, as they would be available to all of us at our convenience and the expense is relatively low (S013)

Keep up the good work - you have a tough job. I look forward to more access to audio/VCR tapes for use at home (S017)

I agree with the importance of C/E, support C/E, and partake in C/E but I do <u>not</u> agree with legislated or mandatory C/E. The interest, the daily requirements and future requirements within our profession are too varied and too individual to be legislated by a few (S021)

As a fairly recent graduate I perceive myself to be keen and self-motivated in the area of C/E. However, practicing primarily as a solo practitioner makes it extremely difficult to keep abreast of current procedures, etc. I am sure this view is held by many other solo practitioners. There is no easy solution. However, I require C/E programs that are accurate, concise and which can be accommodated into my own time schedule. Hence I try to read every day but seldom go to formal C/E programs unless it combines both a holdiay and suites my seasonal schedule (S023)

More regional semionars. I realize that the last few were not well attended and I don't really know why. Advertise audio-visual library more extensively may be useful (S036)

I believe providing seminars, materials, courses is an excellent service. However, I am keenly aware that certain individuals do their utmost to stay current and others do absolutely nothing. I do not believe making C/E mandatory will change the attitude of those veterinarians that perhaps need it most. Also be aware that if you are located in Regina or Saskatoon the ability to participate is much easier then if located in more rural locations (S037)

C/E is a highly personal matter requiring effort and a positive attitude. Either you have it or you don't. I always attend C/E or Association meetings with great anticipation. Often I come away with a feeing of being let down with the quality of material presented, with the "old" material rehashed fro the Nth time. Some days I'll

spend four-five hours reading and other days none at all. On the average one hour per day is usual - textbooks for reference material, journals for the C/E aspects. As a solo practitioner time of year is very important as I have an obligation to my clients to provide service when required, and June is a busy month. I hate C/E meetings on a Sunday. As a group we do not wish to infringe on someone's Sunday to make him/her attend C/E meetings, specially if C/E should be mandatory (S038)

The key is to have topics that are of practice use and information that we will use in own day to day work (S044)

Keep drug companies out of C/E. This is a major failing point of professional C/E in North America (S059)

One should not be forced to attend topics that are not of interest (S062)

I was very impressed with the depth of this questionnaire. I look forward to the survey results (S063)

I feel that policing of C/E according to strict time frames is likely unnecessary and if better opportunities to obtain more than journals was available to isolated vets. If videotapes, regional meetings were provided with practical material, many veterinarians would voluntarily participate to a greater degree than what exists now. Meetings held with two or three themes are much better than a little bit of everything (S072)

Judging from the comments at one of the plenary sessions at the 1988 CVMA convention, there seems to be a vast discrepancy in the perception of the essence of a veterinarian. To my small animal clients a veterinarian is a doctor to their pets; to the large animal clients a practitioner should be a cross between cowboy, fire engine service and herd manager. Our own perception of our roles are varied. To this end it is difficult for C/E to satisfy all needs. That is why it is difficult to make C/E mandatory. There are so many disciplines encompassed by veterinary medicine that there would need to be courses almost every onth in reasonable distance in order to supply the needs of practitioners all calling themselves veterinarians. I am not against C/E but already I find it difficult to keep current with all aspects of practice. It would be an insurmountable task to find C/E courses away form practice but within reasonable travel distance that would be appropriate for all (S073)

I believe that professional integrity is more important than competence. Integrity will gain more respect from our customers. Some very competent veterinarians may select the more complicated and expensive route which may not be in the best interest of our clients or our patients (S076)

I feel that the acquisition of a high quality updated video library would be very useful, especially now that VCR's are in the home. These should be aimed at the level of the practitioner rather than the new student (S080)

As a senior practitioner nearing retirement, I pride myself of keeping abreast the new knowledge and procedures in my profession. I am somewhat taken back at the attitudes of more recent graduates regarding dedication to the profession. I have made every effort to pass on my experience and knowledge to my colleagues. Veterinary practice has been an enjoyable life style for me and my family (S084)

We definitely must maintain good C/E programs (S091)

Being an association with a good number of mixed practitioners, consideration should be given to allow these persons to attend both large and small animal sessions with extending the time away from practice - perhaps repeats or video taping of presentations.

C/E is very important to all veterinarians. Conventions and meetings

boost my enthusiasm for the profession. After months in rural practice you tend to become lax in all your techniques and ideas (S099)

A lot of general interest seminars/meetings designed for general practitioners are not of much value unless you are dealing with all species. The more specialized practitioners are, must seek out special interest meetings further afield (S102)

All vet medical programs seem to deal with treating effects, but the causes are rarely addressed. It would appear to me that universal animal health would be a disaster for most vet-medical practitioners (S115)

C/E could be a fantastic thing but I am fearful that as the concept of good specialized courses with direct use for the practitioner gets into the system it will produce a burearocratic night mare turning out watered down programs and courses that fulfil the teaching standards of the college, expand the department of C/E, increase government grants and wages to department heads and by the time practitioners get the final product it will simply be a spin off of a large beaucrocy trying to maintain self. I take regular C/E courses but the most useful are by colleagues that are recognized as being the best in their field. This way my participation time is mininmal and benefit is maximum. Please do not mandate C/E. We all learn at different rates and have such varied specialty interests that it would be very costly to produce such programs that would benefit everyone. What would benefit practitioners would be seminars on the ability to run clinics, tackle new medical problems, always try to bring a fresh perspective to old problems, basically to get practitioners to feel good about their profession and turn that good feeling into an improved practice (S117)

For some time now I have been quite concerned about the dollar figure attached to many of the programs. However inviting and intersting, they may be, they must also be affordable. The home environment appears to be for many the only manageable answer - completed as in the past with occasional seminar and the C/E dose at association meetings (S120)

I did not fill out this questionnaire the first time around because it is so highly slanted towards practitioners that it is not particularly applicable to me or my situation. I would think that my opinions (as a veterinary research scientist) would be sufficiently different from those of practitioners on the subject of C/E that mine should not be included in the survey (S123)

Submit a question annually to membership regarding: subject matter possibilities; location; time; lenght of program; type of delivery, etc. and respond accordingly. You will be reasonably timely to the majority of them. Also ask for speaker suggestions (S141)

In designing any program, participants must be given the highest priority. If they wish to come to learn and improve, then every effort must be made to allow this to happen. Instructors times may have to be compromised to ensure quality C/E for practitioners at their most suitable times. The Western States Conference offers an enormous opportunity for C/E to everyone who truly wishes to improve themselves. C/E should not be mandatory. It is something we should all want. It is the role of those who help to design any C/E program or particpate in one to ensure that those who learn something and will want to return. Again, it must "never" be a waste of time (143)

Appendix B

THE QUESTIONNAIRE

1988 S.V.M.A. SURVEY ON CONTINUING EDUCATION

PART A - PARTICIPATION IN CONTINUING EDUCATION

This part of the survey form has been designed to obtain an estimate of the amount of time which veterinarians spend participating in continuing education. It is recognized that only rough estimates will be obtained.

PLEASE NOTE: THE PERIOD UNDER STUDY IS -
FROM SEPTEMBER 1, 1987 TO AUGUST 31, 1988

Please estimate the number of hours of participation for each category:
1) AT HOME; 2) AWAY FROM HOME. Avoid using fractions.

Include only the time in which you participated with the expectation that you would learn to practice veterinary medicine, in all of its ramifications, more effectively. It is accepted that you are the best judge of what should be classified as continuing professional education as distinct from some other form of adult education.

FIRST - FOR CONTINUING EDUCATION METHODS IN WHICH YOU WOULD ORDINARILY PARTICIPATE AT YOUR HOME, OFFICE OR CLINIC

Please estimate the average number of hours (including zero) PER MONTH for each method for the period [SEPTEMBER 1, 1987 to AUGUST 31, 1988].

METHOD	ESTIMATED NUMBER OF HOURS PER MONTH FOR EACH METHOD
Reading	
a) of professional journals, papers, magazine, brochures	_____ hours
b) textbooks on professional subjects	_____ hours
c) unsolicited medical literature	_____ hours
Viewing Videotapes (VTR's)	_____ hours
Listening to Audiotapes or Records	_____ hours
Broadcast Radio or Television Programs	_____ hours
Viewing Slide Sets	_____ hours
Correspondence Courses	_____ hours
Discussions and/or Correspondence (e.g. with colleagues) about Professional Topics	_____ hours
Other Methods (please specify)	
_____	_____ hours
_____	_____ hours
ESTIMATED AVERAGE TOTAL NUMBER OF HOURS PER MONTH	_____ hours

SECOND - FOR CONTINUING EDUCATION METHODS IN WHICH YOU ORDINARILY PARTICIPATE **AWAY FROM** YOUR HOME, OFFICE OR CLINIC

Do not include time spent at business meetings or similar sessions or in travel.

Please estimate the number of hours of attendance (including zero) for each meeting you attended DURING THE ENTIRE PERIOD* SEPTEMBER 1, 1987 to AUGUST 31, 1988.

TYPES OF MEETINGS	ESTIMATED NUMBER OF HOURS FOR THE ENTIRE PERIOD
Local and Regional Society Meetings (e.g. : Regina Academy; South-East Regional)	_____ hours
Provincial Association Meetings (e.g.: Meetings with the SVMA)	_____ hours
Federal Association Meetings (e.g.: C.V.M.A., Canadian Association of Veterinary Ophthalmologists)	_____ hours
WCVM - Sponsored Programs (e.g.: Embryo Transfer Short Course; Orthopedic Wet Lab)	_____ hours
Programs Sponsored by Other Academic Institutions (specify)	_____ hours
_____	
_____	
_____	
Foreign Meetings - e.g.: AVMA - Portland; AAHA Regional - Denver; Washington VMA - Spokane; Western Vet. Conf. - Las Vegas)	_____ hours
_____	
_____	
Other Meetings	_____ hours
_____	
_____	
_____	
_____	
ESTIMATED TOTAL NUMBER FOR THE PERIOD*	_____ hours

THE SEVEN-POINT SCALE

Trying to get a "reading" on attitudes and feelings represents a real challenge to questionnaire designers. The seven-point scale is as good a device as any for accomplishing this task. It also simplifies data analysis.

In this questionnaire you will be asked to indicate your feelings about several items by circling the most appropriate number on a seven-point scale.

By circling '1' you would indicate that your feelings could best be described by the adjective which is printed at the left end of the scale; by circling '7', by the adjective at the right end of the scale. By circling ('2' or '3') or ('5' or '6') you would indicate that your feelings could be described better as being somewhat like '1' or '7' respectively.

A circle around number '4' would indicate a neutral position.

PART B - ATTITUDE AND FEELINGS CONCERNING CONTINUING EDUCATION AND THE VETERINARY PROFESSION

1. How important do you regard your participation in continuing education as it is related to:

   a) your ability to earn a living?

   very important 1 2 3 4 5 6 7 not important at all

   b) your prestige in your community?

   very important 1 2 3 4 5 6 7 not important at all

   c) the respect of your family and friends?

   very important 1 2 3 4 5 6 7 not important at all

   d) the respect of your colleagues?

   very important 1 2 3 4 5 6 7 not important at all

   e) your competence in practice?

   very important 1 2 3 4 5 6 7 not important at all

   f) your personal development?

   very important 1 2 3 4 5 6 7 not important at all

   g) your job satisfaction?

   very important 1 2 3 4 5 6 7 not important at all

2. How do you feel about having chosen veterinary medicine as your profession?

very satisfied 1 2 3 4 5 6 7 very dissatisfied

3. How do you feel about the future (ten years from now) of the veterinary profession as it will be related to:

a) salaries for veterinarians?

very optimistic 1 2 3 4 5 6 7 very pessimistic

b) prestige of veterinarians in the community?

very optimistic 1 2 3 4 5 6 7 very pessimistic

c) usefulness of veterinarians to society?

very optimistic 1 2 3 4 5 6 7 very pessimistic

d) potential for offering maximum opportunity for personal development?

very optimistic 1 2 3 4 5 6 7 very pessimistic

4. How do you feel about <u>your</u> future in the veterinary profession?

very optimistic 1 2 3 4 5 6 7 very pessimistic

5. NOTE - Skip this question if you do not have a spouse.

How would you describe the attitude of your spouse with respect to your participation in continuing education?

a) for programs in which you participate at your home or office?

very encouraging 1 2 3 4 5 6 7 very discouraging

b) for programs which necessitate your absence from home?

very encouraging 1 2 3 4 5 6 7 very discouraging

PART C - PERCEIVED OBSTACLES TO CONTINUING EDUCATION

Would you read the following lists of "obstacles to continuing education"? Indicate on the seven-point scales the degree of importance that you feel each of the obstacles generally has as a deterrent to your participation in continuing education.

SUPPLEMENT EACH LIST WITH OTHER OBSTACLES YOU BELIEVE ARE ALSO IMPORTANT

1 = extremely important **7 = not important whatsoever**

FIRST - FOR PROGRAMS HELD AT HOME

1) Most of what is available is of little practical value	1	2	3	4	5	6	7
2) Need to spend more time with family	1	2	3	4	5	6	7
3) Difficulty understanding the material	1	2	3	4	5	6	7
4) Too much work to do	1	2	3	4	5	6	7
5) Most programs are not sufficiently focused on areas of interest	1	2	3	4	5	6	7
6) Too many interruptions	1	2	3	4	5	6	7
7) Too many competing interests	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

SECONDLY - FOR PROGRAMS HELD AWAY FROM HOME

1) Most of what is available is of little practical value	1	2	3	4	5	6	7
2) Need to spend more time with family	1	2	3	4	5	6	7
3) Difficulty understanding the material	1	2	3	4	5	6	7
4) Too much work to do	1	2	3	4	5	6	7
5) Programs are usually held at a busy time of year	1	2	3	4	5	6	7
6) The cost is usually too high	1	2	3	4	5	6	7
7) Too many competing interests	1	2	3	4	5	6	7
8) Distances to travel are usually excessive	1	2	3	4	5	6	7
9) Most programs are not sufficiently focused on areas of interest	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

PART D - DEMOGRAPHIC AND WORK - RELATED INFORMATION

1. What was your age on September 1, 1988? _____years of age

2. Sex (please circle) male female

3. In what year did you receive the DVM (or equivalent) degree? 19_____

4. From what institution? (please circle) OVC St-Hy WCVM

   Other (please specify) _____

NOTE - THE PERIOD* BEING STUDIED IS FROM SEPTEMBER 1, 1987 TO AUGUST 31, 1988

5. What was the maximum number of dependents who were in full-time residence with you at any time during the period*? _____ dependants

   Classify as a dependant any relative or close acquaintance whom you regarded as being a member of your household. Economic dependence is not a factor.

6. What is your estimate of your personal income earned during the period* from **veterinary practice alone?**

   Investment income, including that derived from clinic-related assets should not be included.

   The figure being sought here might be described as your gross "take home pay" from veterinary work (i.e. before personal taxes were deducted).

   Please circle the most appropriate category.

under $5,000	$5,001 to 10,000	$10,001 to 15,000
$15,001 to 20,000	$20,001 to 25,000	$25,001 to 30,000
$30,001 to 35,000	$35,001 to 40,000	$40,001 to 45,000
$45,001 to 50,000	$50,001 to 55,000	$55,001 to 60,000
$60,001 to 65,000	$65,001 to 70,000	$70,001 to 75,000
$75,001 to 80,000	$80,001 to 85,000	$85,001 to 90,000
$90,001 to 95,000	$95,001 to 100,000	$100,001 to 105,000
$105,001 to 110,000	$110,001 to 115,000	over $115,000

7. Would you estimate the approximate percentage of personal income that was derived during the period* from non-veterinary activities or sources? _____ per cent

   Please circle the appropriate words below if you:

   don't know or prefer not to answer

8. Exclusive of vacation periods, about how many hours per week did you spend, on the average, at all activities associated with veterinary work? (If there was a substantial amount of seasonal variation try to estimate the average for the period* as closely as possible.) _____ hours worked per week

9. What is the population of the city or town in which your office is located?

less than 500	501 to 1,000	1,001 to 5,000
5,001 to 10,000	10,001 to 20,000	20,001 to 50,000
50,001 to 100,000	100,001 to 250,000	

10. Please circle the field of employment which best described your employment situation as it was for most of the period*.

practitioner	federal government	provincial government
municipal government	academic institution	employed in industry
postgraduate	retired	unemployed

other (please specify) _____

NOTE - Questions #11 & #12 are to be answered only by those veterinarians who identified themselves in question #10 as a "practitioner".

11. Would you estimate the percentage of your **TIME** which you spent in the areas of practice associated with the various species?

For the purpose of this question please do not include such duties as administration, continuing education, community activities, etc. as practice activities.

Small Animal Practice (e.g. dogs, cats, exotic pets)	____ % of time
Food Animal Practice (e.g. cattle, swine, poultry)	____ % of time
Equine Practice	____ % of time
Other Animals (e.g. zoo animals, laboratory animals)	____ % of time
TOTAL	100 % of time

12. Which one of the following classifications best described your position in the practice for most of the period*? (please circle)

solo practitioner	principal in group practice	partner in a group practice
employee in a group practice	consultant	locum

other (please specify) _____

PART E - FINANCING CONTINUING EDUCATION

1. Approximately how much money **should** a veterinarian be prepared to spend on all forms of continuing education in a single year? Include the costs of travel and accommodation and printed materials but do not include membership fees in professional societies.

under $100	$101 to 500	$501 to 1,000
$1,001 to 1,500	$1,501 to 2,000	$2,001 to 2,500
$2,501 to 3,000	$3,001 to 3,500	over $3,500

Would you indicate your level of agreement (or disagreement) to each of the following statements on its seven-point scale?

1 = completely agree **7 = totally disagree**

2. Generally speaking, continuing education is far too expensive	1	2	3	4	5	6	7
3. The cost of continuing education should be paid entirely by those who participate	1	2	3	4	5	6	7
4. Veterinary continuing education should be subsidized by the provincial government	1	2	3	4	5	6	7
5. Veterinary continuing education should be subsidized by the federal government	1	2	3	4	5	6	7
6. Part of the fees paid to the S.V.M.A. should go to subsidize veterinary continuing education	1	2	3	4	5	6	7
7. The Western College of Veterinary Medicine should subsidize veterinary continuing education	1	2	3	4	5	6	7
8. The pharmaceutical industry should support continuing veterinary education	1	2	3	4	5	6	7

COMMENTS _____

PART F - MANDATORY CONTINUING EDUCATION

1. How would you feel about legislation being introduced that would require each veterinarian to complete annually an assigned level of participation in continuing education as a requirement to maintain licensure to practice?

strongly in favour 1 2 3 4 5 6 7 strongly opposed

Comments _____

_____

_____

For the purpose of this study, we would like to identify two forms of continuing education:

"Formal Continuing Education" in which the veterinarian would leave his/her home or clinic to attend a lecture, seminar or wet lab. Hours of participation would include only the actual hours that he was involved in attendance at educational sessions (i.e. travel time, lunch and refreshment breaks would not be counted).

"Informal Continuing Education" would usually be pursued in the confines of the home or clinic and would involve such activities as: reading, viewing or listening to educational materials.

2. On the presumption that some form of mandatory continuing education were to be introduced, what is the minimum number of hours that should be required annually to maintain licensure?

less than 4 4 8 12 16 20 24 more than 24

Comments _____

_____

_____

3. On the presumption that some form of mandatory continuing education were to be introduced, what is the maximum percentage of "informal" hours that should be recognized for credit?

0% 20% 40% 60% 80% 100%

Comments _____

_____

_____

PART G - WESTERN COLLEGE OF VETERINARY MEDICINE

The veterinary profession (and the WCVM) have experienced many changes since the Continuing Veterinary Education Section was established in 1968. It is time to assess the attitudes of veterinarians with regards to the way that they see the College meeting their needs in professional development.

Would you please indicate your opinions as to the activities that should be emphasized by the College as it develops its programs over the next ten years?

1 = SHOULD BE GIVEN STRONG EMPHASIS

7 = SHOULD RECEIVE NO CONSIDERATION WHATSOEVER

A) REGIONAL MEETINGS

Six-hour meetings, held at six locations in Saskatchewan featuring a speaker from the WCVM and covering a topic in considerable depth. The usual format would involve two to three hours of lecture, possibly an hour of videotaped material, round-table discussions, and an hour for supper.
Estimated cost (including supper) $75 to $100

1 2 3 4 5 6 7

Comments _____

_____

_____

_____

B) ON-CAMPUS WET LABS

Two or three-day short courses held at Saskatoon. Lectures would be kept to a minimum and the emphasis would be on "hands-on" application of principles (e.g. surgical approaches; clinical pathology procedures; computer applications.)

Estimated costs (including lunches and one supper) $250 to $600

1 2 3 4 5 6 7

Comments _____

_____

_____

_____

1 = **SHOULD BE GIVEN STRONG EMPHASIS**

7 = **SHOULD RECEIVE NO CONSIDERATION WHATSOEVER**

C) AUDIO-VISUAL LIBRARY

The Colege would maintain a rental library of videotapes, slide/tape sets, audiocassettes, and some printed material.

Rental of materials (including postage one-way) would be approximately $9.00 per unit.

Purchase of new materials would be financed through rentals and donations from the veterinary profession and industry.

1 2 3 4 5 6 7

Comments _____

_____

_____

_____

D) JUNE CONFERENCE

A conference would be organized each year that a CVMA meeting is not scheduled to be held in western Canada.

Each conference would occupy five days (two days small animal; one day general interest; two-days food animals).

The Conference would develop into an annual WCVM "Homecoming". Class reunions would be emphasized.

The registration fees (approximately $100 per day) would include lunches.

1 2 3 4 5 6 7

Comments _____

_____

_____

_____

1 = SHOULD BE GIVEN STRONG EMPHASIS

7 = SHOULD RECEIVE NO CONSIDERATION WHATSOEVER

E) POSTGRADUATE DIPLOMA CLASS

One class would be held at the University of Saskatchewan annually in May or June and would consist of: 75 to 90 student-contact hours of lectures and laboratory sessions; assigned reading to be completed before classes commence; a formal examination and; completion of a term paper. On completion of five classes, students are eligible to receive the Postgraduate Diploma in Veterinary Medicine from the University.
Cost of the 1988 class was: tuition and other fees - $365; texts - $110; accommodation and meals - $850.

1 2 3 4 5 6 7

Comments _____

_____

_____

_____

F) CONTINUING EDUCATION NEWSLETTER

A newsletter would be published quarterly on upcoming continuing education events; articles gleaned from similar publications now available from U.S. schools and articles written by WCVM faculty of interest to practitioners.
Estimated cost (including postage) $8 to $10 per year.

1 2 3 4 5 6 7

G) LIST ANY OTHER PROGRAMS THAT SHOULD BE CONSIDERED.

_____

_____

_____

Comments_____

_____

_____

_____

_____

PART H - PREFERENCES FOR CONTINUING EDUCATION SCHEDULING

1. Would you please indicate your preferences regarding each of the following 31 items which concern the scheduling and length of continuing education programs?

1 = highly preferred **7 = not acceptable**

DAYS OF THE WEEK

Sunday	1	2	3	4	5	6	7	Monday	1	2	3	4	5	6	7
Tuesday	1	2	3	4	5	6	7	Wednesday	1	2	3	4	5	6	7
Thursday	1	2	3	4	5	6	7	Friday	1	2	3	4	5	6	7
Saturday	1	2	3	4	5	6	7								

MONTHS OF THE YEAR

January	1	2	3	4	5	6	7	February	1	2	3	4	5	6	7
March	1	2	3	4	5	6	7	April	1	2	3	4	5	6	7
May	1	2	3	4	5	6	7	June	1	2	3	4	5	6	7
July	1	2	3	4	5	6	7	August	1	2	3	4	5	6	7
September	1	2	3	4	5	6	7	October	1	2	3	4	5	6	7
November	1	2	3	4	5	6	7	December	1	2	3	4	5	6	7

PROGRAM LENGTH

Morning	1	2	3	4	5	6	7	Afternoon	1	2	3	4	5	6	7
Evening	1	2	3	4	5	6	7	Half Day	1	2	3	4	5	6	7
One Day	1	2	3	4	5	6	7	Two Days	1	2	3	4	5	6	7
Three Days	1	2	3	4	5	6	7	Four Days	1	2	3	4	5	6	7
Five Days	1	2	3	4	5	6	7	Two Weeks	1	2	3	4	5	6	7
Three Weeks	1	2	3	4	5	6	7	One Month	1	2	3	4	5	6	7

PART I - PERCEIVED EFFECTIVENESS OF CONTINUING EDUCATION METHODS

In this section you are asked to indicate your thoughts on the effectiveness of several continuing education methods. We are looking only for your **perception** regardless of your experience, if any, with each method.

Assume that the content would be of a uniform, high quality. It is the **method** that is being evaluated.

Please rate every method listed and add others of which you are aware.
WRITTEN COMMENTS WOULD BE ESPECIALLY APPRECIATED.

1 = highly effective **7 = not at all effective**

A) LECTURES/SEMINARS 1 2 3 4 5 6 7

Comments _____

_____

B) WET LABS 1 2 3 4 5 6 7

Comments _____

_____

C) C.E. VIDEOTAPES 1 2 3 4 5 6 7

Comments _____

_____

D) INFORMAL STUDY GROUPS WITH COLLEAGUES 1 2 3 4 5 6 7

Comments _____

_____

E) OTHER METHODS (please specify and comment on) _____

_____

_____

LAST TWO QUESTIONS:

1. How do you feel about having competent veterinarians, such as your colleagues, present continuing education programs in place of professional educators?

highly preferable 1 2 3 4 5 6 7 not at all acceptable

Comments _____

_____

_____

2) How do you feel about having meetings of specialty groups (e.g. veterinary dermatologists) scheduled to take place immediately prior or immediately following the provincial conventions?

strongly in favour 1 2 3 4 5 6 7 strongly opposed

Comments _____

_____

_____

GENERAL COMMENTS

ANY COMMENTS YOU MIGHT WISH TO OFFER CONCERNING ANY ASPECT OF CONTINUING VETERINARY EDUCATION (INCLUDING THIS SURVEY) WOULD BE VERY WELCOME.

Please feel free to add further comments on the back of this sheet or on another page. Thank you very much for your cooperation. In the interest of economy, individual acknowledgments of returned questionnaires will not be sent.

PREFERENCES FOR CONTINUING EDUCATION TOPICS

NOTE - ONLY COMPLETE THOSE PARTS OF THIS SECTION WHICH APPLY TO YOUR INTERESTS IN VETERINARY MEDICINE

The following are lists of topics which could be presented at future continuing education programs. PLEASE ADD OTHER TOPICS WHICH WOULD BE OF INTEREST TO YOU.

Rate each topic on its seven-point scale according to your interest in it.

1 = of very high interest **7 = of no interest whatsoever**

SPECIAL SPECIES INTERESTS

caged birds	1	2	3	4	5	6	7
exotic pets	1	2	3	4	5	6	7
fish (commercial)	1	2	3	4	5	6	7
fish (tropical)	1	2	3	4	5	6	7
poultry	1	2	3	4	5	6	7
sheep and goats	1	2	3	4	5	6	7
wildlife	1	2	3	4	5	6	7
zoo animals	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

GENERAL TOPICS

advances in biotechnology	1	2	3	4	5	6	7
business management	1	2	3	4	5	6	7
computers in veterinary practice	1	2	3	4	5	6	7
ethics of animal use	1	2	3	4	5	6	7
food hygiene	1	2	3	4	5	6	7
foreign animal diseases	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

1 = of very high interest **7 = of no interest whatsoever**

SMALL ANIMAL TOPICS

cardiovascular diseases	1	2	3	4	5	6	7
cryosurgery	1	2	3	4	5	6	7
dentistry	1	2	3	4	5	6	7
diagnostic tests	1	2	3	4	5	6	7
endocrine diseases	1	2	3	4	5	6	7
ethology (animal behaviour)	1	2	3	4	5	6	7
gastroenteric diseases	1	2	3	4	5	6	7
human/animal bond	1	2	3	4	5	6	7
joint diseases	1	2	3	4	5	6	7
metabolic diseases	1	2	3	4	5	6	7
microsurgery	1	2	3	4	5	6	7
neonatal diseases	1	2	3	4	5	6	7
neurologic diseases	1	2	3	4	5	6	7
nutrition	1	2	3	4	5	6	7
oncology	1	2	3	4	5	6	7
ophthalmology	1	2	3	4	5	6	7
parasitic diseases	1	2	3	4	5	6	7
radiology (diagnostic)	1	2	3	4	5	6	7
radiology (therapeutic)	1	2	3	4	5	6	7
reproductive diseases	1	2	3	4	5	6	7
respiratory diseases	1	2	3	4	5	6	7
skin diseases	1	2	3	4	5	6	7
surgery (orthopedic)	1	2	3	4	5	6	7
ultrasound techniques	1	2	3	4	5	6	7
urinary diseases	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

1 = of very high interest **7 = of no interest whatsoever**

EQUINE TOPICS

abdominal pain	1	2	3	4	5	6	7
dentistry	1	2	3	4	5	6	7
diagnostic tests	1	2	3	4	5	6	7
electrocardiography	1	2	3	4	5	6	7
endocrine disorders	1	2	3	4	5	6	7
ethology (animal behaviour)	1	2	3	4	5	6	7
gastroenteric diseases	1	2	3	4	5	6	7
infectious diseases	1	2	3	4	5	6	7
lameness (lower limb)	1	2	3	4	5	6	7
lameness (upper limb)	1	2	3	4	5	6	7
law and the veterinarian	1	2	3	4	5	6	7
microsurgery	1	2	3	4	5	6	7
neonatal diseases	1	2	3	4	5	6	7
neurologic diseases	1	2	3	4	5	6	7
nutrition	1	2	3	4	5	6	7
parasitic diseases	1	2	3	4	5	6	7
preventive medicine	1	2	3	4	5	6	7
radiology (diagnostic)	1	2	3	4	5	6	7
reproductive disorders	1	2	3	4	5	6	7
respiratory diseases	1	2	3	4	5	6	7
surgery	1	2	3	4	5	6	7
therapeutic shoeing	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7

1 = of very high interest **7 = of no interest whatsoever**

FOOD ANIMAL TOPICS

agricultural economics	1	2	3	4	5	6	7
buildings and facilities	1	2	3	4	5	6	7
bull evaluation	1	2	3	4	5	6	7
diagnostic tests	1	2	3	4	5	6	7
digestive disorders	1	2	3	4	5	6	7
embryo transfer/freezing	1	2	3	4	5	6	7
endocrine diseases	1	2	3	4	5	6	7
epidemiology	1	2	3	4	5	6	7
ethology (animal behaviour)	1	2	3	4	5	6	7
foot diseases	1	2	3	4	5	6	7
foreign animal diseases	1	2	3	4	5	6	7
infectious diseases	1	2	3	4	5	6	7
inherited defects	1	2	3	4	5	6	7
internal medicine	1	2	3	4	5	6	7
metabolic diseases	1	2	3	4	5	6	7
neonatal diseases	1	2	3	4	5	6	7
nutrition	1	2	3	4	5	6	7
preventive medicine	1	2	3	4	5	6	7
record systems	1	2	3	4	5	6	7
reproductive disorders	1	2	3	4	5	6	7
respiratory diseases	1	2	3	4	5	6	7
surgery	1	2	3	4	5	6	7
ultrasound techniques	1	2	3	4	5	6	7
zoonoses	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7
_____	1	2	3	4	5	6	7